



DAWN Novel Oral Anticoagulants (NonVKA) Monitoring

User and Safety Manual

Rivaroxaban (Xarelto) Module

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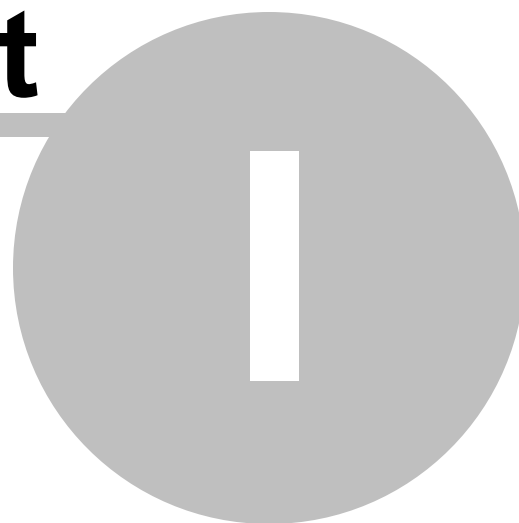
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Part



1 Novel Oral Anticoagulants Module User Manual



The Novel Oral Anticoagulants User Manual provides the steps and workflows needed to add, edit and manage patients on novel oral anticoagulants (eg Rivaroxaban) within the DAWN system safely and effectively.

DAWN is registered trademark of **4S Information Systems Ltd.** and represents a new era in software where the adaptability built into the software empowers the customers, with minimum IT professional help, to quickly get the information they require from their system without long delays.

4S DAWN Clinical Software

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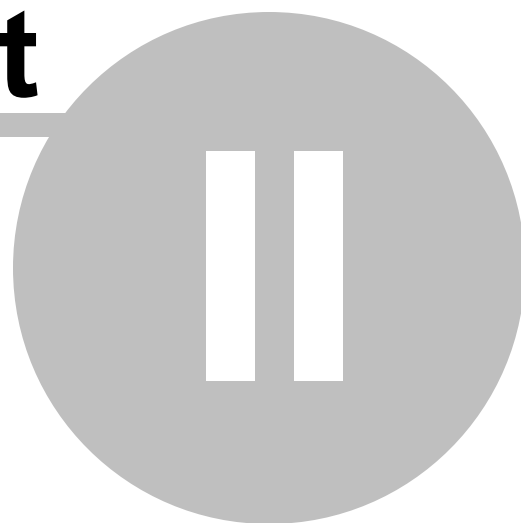
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Part



2 How To Use the Manual



HOW TO USE THE MANUAL

If a text bubble asks you to 'Click Here' and a red circle is present on the bubble, you will be able to click on the link to take you to the next screen.

For example, clicking on the link on the image below will take you to another screen below:

A screenshot of a clinical software interface. At the top, a header bar displays 'Stevenson Lisa', '01/01/1922', and '54657565'. Below this, a form contains several fields: 'Risk class' with a dropdown menu set to 'High'; 'Pref. clinic' with a dropdown menu set to 'Anticoagulation Clinic (12345)'; 'Phone' with a dropdown menu set to '610 374 3522 - home'; and 'Age' with the value '87'. A yellow text bubble with a red circle points to the 'Diagnosis' field, which contains the text 'Click here on the Diagnosis text'. Below the 'Diagnosis' field, there are several other fields: 'Target Range' with the value '2.0 - 3.0 (2.5 Target)', 'Anticoagulant' with the value 'WARFARIN 10 MG WEEKLY DOSE', and 'Start date' with the value '02/03/2009 - Treatment stopped'. At the bottom, there are two buttons: 'Treatment Plan' and 'Risks'. The 'Treatment Plan' button is highlighted with a red border. The 'Risks' button is also highlighted with a red border. The 'Treatment Plan' button has a red circle next to it, and a yellow text bubble points to it with the text 'Click here on the Diagnosis text'.

2.1 Hyperlinks move to the Next Screen

Diagnoses (Stevenson Lisa (01/01/1922))

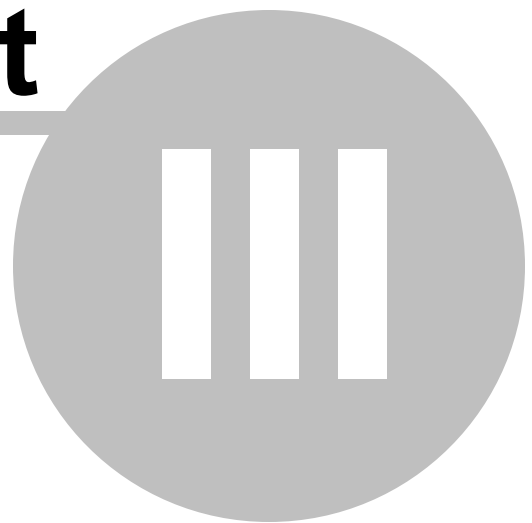
Diagnosis	DiagnosisDate	DiagnosisNotes	Recorded by	Dia
- ARRHYTHMIA SUPRAVENTRICULAR	24/04/2009		Big Hospital - Support 45	(No
- ANGINA	20/04/2009		Big Hospital - Support 45	(No

Click here on this text box to return to the previous screen

We are taken to this next screen

Hyperlinks help you to move through the electronic manual easily.

Part



3 Safety Manual

Introduction

This document is intended to highlight potential safety issues that must be understood and addressed before using the DAWN Rivaroxaban module.

It is vital for the on-going safe operation of your software that users of the software are aware of the Safety Instructions as detailed in this manual. Please keep this manual in a safe place for ready referral by your staff.

What Key Safety Areas Have Been Identified?

The following key safety areas have been identified:

Correct Patient Identification:

It is critical that the users ensure that they have identified the correct patient before taking action such as editing information, dosing, reports or taking any clinical action.

Avoiding Transcription or Transposition Errors:

Careful procedures should be derived and instituted to check that any transcription error or transposition of data cannot occur. The aim should be to eliminate completely any such potential for this type of error.

Checking Clarity of Dose Instruction to Patient / Healthcare Professional:

It is essential to ensure that any dose instruction messages printed / emailed / faxed are clear and unambiguous. As well as the format of the instruction itself, users need to check that they are clear so there is no scope for confusion.

Losing Track of a Patient:

It is vital that a patient does not get 'lost' within the system, e.g. treatment plan wrongly closed, no next test appointment made, no follow up on non-attendances.

Ensuring Operational, Data and System Set-up Integrity:

It is essential that the system and procedures are critically examined initially and routinely to ensure that the whole system integrity is maintained at all times.

This safety section is intended to highlight potential safety issues that must be understood and addressed before using the DAWN system.

It is vital for the on-going safe operation of your software that users of the software are aware of the Safety Instructions as detailed in this manual. Please keep this section of the manual in a safe place for ready referral by your staff.

The following section is split into the following areas below. Safety areas identified in all application areas are divided into one group, while separate anticoagulation and clinical

framework sections are listed below:

Safety Areas Identified for Clinical Framework Area:

1. [What Safety Issues Are there?](#)
2. [Safety Check List for Adding/Editing Patient's Details](#)
3. [Safety Check List for Adding/Editing Patient Treatment Plan Details](#)
4. [Safety Check List for Adding Previous Treatment History](#)
5. [Safety Check List for Recording Medications and Their Doses](#)
6. [Safety Check List for Warnings And Contraindications](#)

Safety Areas Identified for all Application Areas:

1. [Safety Check List for Adding/Editing/Deleting Letters/Messages](#)
2. [Safety Check List for Adding/Editing/Deleting Patient Questionnaires](#)
3. [Safety Check List for Clinic Settings](#)
4. [Safety Check List for Defining Procedures, Letters and Events](#)
5. [Safety Check List for Defining Look Up Information](#)
6. [Safety Check List for List View Settings](#)
7. [Safety Check List for Reports](#)
8. [Safety Check List for Questionnaire Definitions](#)
9. [Safety Check List for Data and Operational Integrity](#)

3.1 What Safety Issues Are there?

The DAWN Rivaroxaban module provides the functionality to manage your non-VKA patients. The application allows for test results and specific details to be entered and examined to highlight any known contraindication or risk.

The application should be seen as an aid to the Healthcare Professional. It is a condition of use that all instructions or information issued by the application are checked by a competent healthcare professional before instructing the patient.



Inadequate reviewing of patient results and the next review date could cause severe injury or death.

Check that all medication dosages are correct before instructing the patient.

Develop written procedures to use with this system to meet your local needs.

These procedures should incorporate not only necessary operational steps

but safety steps. The computer system along with these written procedures should form part of a quality management system. Subject this system to external auditing by a suitable quality standards authority.

Appoint a competent healthcare professional to carry out the patient monitoring.

Train staff in the use of the computer system.



Check that all non-attendees are followed up and every patient has a next review date.

DAWN Rivaroxaban module provides the use of List Views to aid in identifying the following:

- non-attendees
- patients with no next review date

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3.2 Safety Check List for Adding/Editing/Deleting Letters/Messages

- Ensure all new, altered and imported letters / message templates have been checked for correctness and have been thoroughly tested before using them in a live situation.
- Check the correctness of all letters/messages sent out from the system. This should be carried out for all available methods of communication including printed output, emails and faxes.
- To prevent the wrong information being communicated to a patient or healthcare professional, where possible, include the patient identifiers in any printed output, emails and faxes (e.g. dose instructions).
- To prevent the wrong dose instruction being communicated to a patient, include the current test date alongside the dose instruction.
- Where printing user letters/messages for a group of patients, have a tally of the number of user letters you expect to produce and match that to the number of user letters actually produced, to avoid missing anyone out.

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3.3 Safety Check List for Adding/Editing/Deleting Patient Questionnaires

- Ensure all new, altered and imported questionnaire types have been checked for correctness and have been thoroughly tested before using them in a live situation.
- When completing a patient questionnaire, check all the captured information is correct before confirming, saving or printing it.

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3.4 Safety Check List for Clinic Diary Settings

- Clinics may be added specially for review or induction of new oral anticoagulant agents or non-VKA with no timeslots or patient capacity set. Ensure that clinics are not over-booked.
- Care should be taken if sharing existing clinics between warfarin and non-VKA patient appointments so that too many patients are not assigned to one day.

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3.5 Safety Check List for Defining Procedures, Letters and Events

- Ensure all procedures have been defined correctly in the Procedure look-up table and have been made available for use by the relevant departments.
- Ensure all events have been defined correctly in the Event look-up table and have been made available for use by the relevant departments.
- Ensure all letters have been defined correctly (via message templates) and have been set up to be created on the appropriate message events.

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3.6 Safety Check List for Defining Look Up Information

- Ensure all information defined in the system look-up tables (like the Specific Risk of Prosthetic Heart Valve) has been entered and checked

for correctness.

- Check that any changes you make to Lookup Anticoagulation tables do not remove important warnings or restrictions from non-VKA patient records.

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3.7 Safety Check List for List View Settings

List views are interactive screens showing lists of patients meeting certain criteria and who require your attention today or this week *etc.* (See [Using List Views](#) topic for more details)

- Check that all the required list views have been set up correctly and are available for use.
- For each list view, check that the correct fields are displayed.
- For each list view, check that each filter brings up the correct patients and that no patients meeting the criteria are missing.

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3.8 Safety Check List for Reports

- Ensure all new, altered and imported reports have been thoroughly tested before using them in a live situation.
- Check that all the required reports have been defined and are available for use.
- For each report, check that the correct fields are included in the report.
- For each report, check that the correct data is being generated.

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3.9 Safety Check List for Questionnaire Definitions

If you have purchased and are using the questionnaire module:

- Ensure all new, altered and imported questionnaire definitions have been set up and checked for correctness. For each questionnaire definition:
 - Ensure the questionnaire definition has been correctly defined with the correct name and code and has been assigned to the

correct department.

- Ensure all the options / calculations have been defined correctly.
- Ensure all new, altered and imported questionnaire definition have been thoroughly tested in your practice system before using them in a live situation.

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3.10 Safety Check List for Data and Operational Integrity

Ensure you have written procedures and physical arrangements for:

- Checking all user profiles are properly set and are checked to be working
- Checking that the system settings are appropriate to the environment and method of working and to optimise system performance within your organisation.
- Taking a backup before you amend or delete settings from look-up and normal tables. Your procedure should also ensure that all other users refrain from making any other changes in the system until you have completed your amendments and verified they are correct. This will help minimise the potential loss of data should you inadvertently delete the incorrect settings and need to restore your database.
- Checking the hardware for possible errors, especially ensuring adequate disk space.
- Replacing backup media regularly - media only has a set storage life.
- Backing up routinely at appropriate intervals and test if you are able to restore the data and programs if required.
- Ensuring your backup procedures are working and are appropriate for your database. If your database recovery type is set to full, ensure you are taking transaction log backups at regular intervals.
- Ensuring backup media is stored safely in a separate place from the computer system and is readily referenced.
- Providing adequate protection from:
 - power failures, notebook/laptop battery discharge and interruptions.
 - staff inadvertently switching power off at the mains.

- Checking for computer virus violation.
- Documenting and reporting software and operational problems or 'near misses' to DAWN Clinical Software and their own management.
- Documenting all changes to system set-up to show they are properly controlled and validated.
- Routinely checking that the DAWN Mailer program (for sending e-mails, networking printing or faxes) is operational and working correctly.
- Ensure your procedures are complete i.e. no sections have been removed, and are kept in a safe and accessible place for ready reference by your users. Make frequent checks that this is the case.
- Preventing and not allowing adding or editing of data in the underlying database by using a third party program or tool. All data access must be done through the DAWN Clinical Framework.
- Keeping all the application files complete and together. Do not copy files from previous copies of the application into the current set of files. The application files have a high inter-dependency and require absolute referential integrity.
- Encouraging use of the practice system to rehearse any infrequently used procedures before live execution.
- Using the practice system to test out future upgrades before applying the upgrade to the live system.
- Ensuring that users do not enter 'real or live' data into it your practice system and use it operationally.
- Ensuring any old, out of date user manuals or ebooks are destroyed and the current versions are readily available with no sections missing in full or in part.

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3.11 Safety Check List for Adding/Editing Patient Details

- When adding a new patient, the user should perform a search to ensure the patient's details have not been previously entered.
- Ensure all patient data (including all data entered via any of the tabs on the patient screen) has been entered and checked for correctness. Attention should be paid to the last name, first name, unit number and

date of birth so that the patient can be uniquely identified every time.

- Ensure all patient procedures that are entered into the system have been checked for correctness.
- Ensure all patient events that are entered into the system have been checked for correctness.
- Ensure all patient reminders that are entered into the system have been checked for correctness.
- Ensure the patient has not been incorrectly marked as deceased or inactive.

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3.12 Safety Check List for Running Clinics / Monitoring Patient Results

- Ensure all entered laboratory results or other measurements are correct and have been entered against the correct patient with the correct test date.
- Check any contraindicated dose and always add a comment to say why the change was made.
- Validate each dose and next date BEFORE “informing the patient”.
- If patient record books are being used, adopt checks to ensure each dosage instruction label is stuck into the correct patient’s record book. For example, print patient identifiers such as name and number on each label and check the current label against previous ones in the book to ensure they match.
- Check dosing information is not copied by hand to the wrong book or patient report
- Check that all patients (including non attendees) due on a particular day have been dealt with completely.
- Check that the wrong information is not communicated to a patient by letter, telephone or any other communication method.
- Routinely ensure that all active patients have a future appointment.

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3.13 Safety Check List for Adding the Next Test Date/Time

- Use the list view to ensure that all active patients have a next test date.

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3.14 Safety Check List for Adding/Editing Patient's Details

- When adding a new patient, the user should perform a search to ensure the patient's details have not been previously entered.
- Ensure all patient data (including all data entered via any of the tabs on the patient screen) has been entered and checked for correctness. Attention should be paid to the last name, first name, unit number and date of birth so that the patient can be uniquely identified every time.
- Ensure all patient procedures that are entered into the system have been checked for correctness.
- Ensure all patient events that are entered into the system have been checked for correctness.
- Ensure all patient reminders that are entered into the system have been checked for correctness.
- Ensure the patient's risk class, if applicable, has been correctly determined and selected.
- Ensure the patient has not been incorrectly marked as deceased or inactive.

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3.15 Safety Check List for Adding/Editing Patient Treatment Plan Details

- Ensure all treatment plan data (including all data entered via any of the tabs on the treatment plan screen) has been entered and checked for correctness. Attention should be paid to ensure:
 - the correct anticoagulant and dose has been chosen for the patient.
 - the correct primary diagnosis has been entered for the patient.

- the correct start date has been entered.
- if short term, the correct treatment duration in weeks and days has been entered.
- the correct phase of therapy was activated.
- the correct next test date and preferred clinic have been entered.
- Ensure the treatment plan has the correct status and has not been suspended or stopped in error.

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3.16 Safety Check List for Adding Previous Treatment History

- You MUST check that the historic results and notes have been entered correctly
- Correct next test date.

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3.17 Safety Check List for Recording Medications and Their Doses

- Check all drugs or medications, dosages and frequencies are recorded correctly before instructing the patient.

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3.18 Safety Check List for Warnings And Contraindication settings

Initiation Questionnaire Definitions

- Check all Initiation Questionnaires have been set up and checked for correctness. For each questionnaire:
 - Ensure required data may be correctly entered.
[For example a patient's renal or hepatic function can be recorded.](#)
 - Ensure all the appropriate warnings to be triggered.
You may need to add new rules if a new warning is reported.
[For example a patient over 80 years may not have certain doses set.](#)
 - Ensure all contraindications are clearly marked as such.
You may need to add new rules if a new contraindication is reported.

Regime settings

- Check all dose settings used in regimes to be accurate and to accommodate the required dosages.

Pre and Post Clinic (day) Checklists

- We recommend that each system manager organises a pre clinic or day checklist and a Post Clinic checklist based on the above checklists

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Part

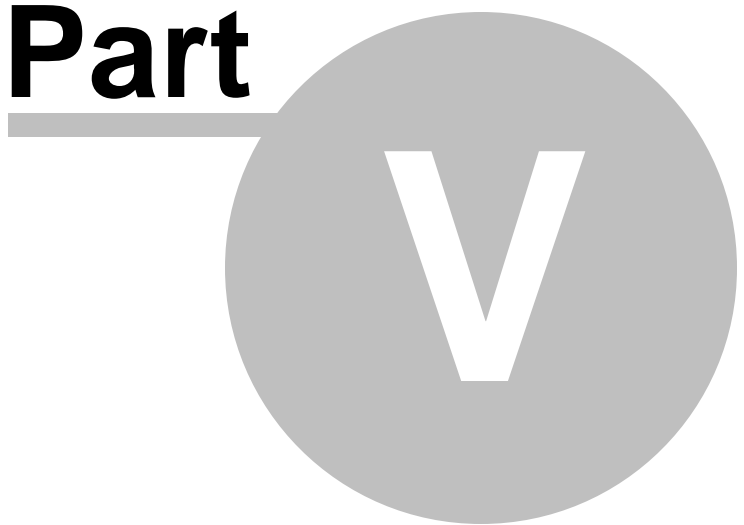
IV

4 Customer Obligations

Customer Software Use Obligations

1. The application should be seen as an aid to the healthcare professional. **All dosage and review interval advice issued by the application must be checked by a competent healthcare professional before instructing the patient.**
2. The customer must have a procedure to ensure **rigorous follow up of non attendees** and ensure that all patients have a next test date.
3. The customer must ensure that only personnel that have been adequately trained in the use of the software should operate the system.
4. Prior to initial use and following any software upgrade or change to the software settings, a appropriate and thorough validation exercise of the software should be completed for your local way of working before 'live' operation. Records of the results of the validation shall be maintained. The validation should be authorised by the lead clinician/physician. A separate Test System which simulates live operation is highly recommended.
5. It is vitally important that the customer site establishes a **robust method of backing up** and restoring their data, including occasional tests of the backups through restoration. Usually the backup should be done at the end of each working day. If there is a lot of system activity a more frequent back-up procedure should be considered.
6. The customer is expected to operate best practice with regard to using pre and post-clinic checklists and keeping their copy of the software up to date. The product is being periodically updated with important safety and operational features. If you are paying software maintenance fees these upgrades are usually free.
7. The customer is expected to keep abreast of key changes and urgent issues in the product and documentation by visiting the webpage <http://www.4s-DAWN.com/DAWNSafetyNotices.htm> weekly. To this end, the customer must inform 4S of changes to lead contact personnel to ensure that communication is not missed.
8. The customer shall review / update the settings (such as questionnaires) and operation of the software on any change to best practise or new advice from drug manufacturers or other relevant bodies.
9. The customer should notify 4S immediately if they notice any anomalies within the data or experience anything within the system that could potentially cause a mishap.

Part



5 Overview of Novel Oral Anticoagulants Module

Features of software to support monitoring of anticoagulation with new oral anticoagulant agents (non-vitamin K antagonists) include

[Non-VKA list view](#) for easy management of scheduled reviews

[Integrated non-VKA history and warfarin treatment records](#) within the patient record

[Structured questionnaire](#) approach to check for contraindications / interactions / risks

[Help](#) to follow the recommended prescribing guidelines

[Powerful reporting](#) on patient outcomes and population data

Able to provide support separately for [other agents](#) besides Rivaroxaban through specifically-designed questionnaires for each agent

The DAWN non-VKA module for Rivaroxaban provides structured questionnaires based on the recommended use of the anticoagulant and these include questionnaires for **Initiation** of anticoagulation and for routine **Follow-up**. Completion of the questionnaires can be scheduled for future dates so that the user can keep track of patients started on Rivaroxaban or due for a change to Rivaroxaban anticoagulation.



This software should be seen as an aid to the Healthcare Professional. It is a condition of use that all instructions or information issued by the application are checked by a competent healthcare professional before instructing the patient.

Inadequate reviewing of patient instructions and the next review date could cause severe injury or death.

Contact 4S DAWN Clinical Software for more information at sales@4s-DAWN.com / support@4s-DAWN.com

5.1 Non-VKA list view

DAWN Rivaroxaban module presents a list of patients for review today / this week / this month. Each patient can have Initiation or Follow-up questionnaires scheduled for future dates.

Worklist	Procedures	Non-VKA	Status	Annual Review	Reminders	Events	Reviews	Proc
Filter With Scheduled & Overdue 14 records found.								
None Scheduled (New treatment plan)								
Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime	
Change, Charlie	C23123123						Rivaroxa	
Lamb, Spring	3542543345						Rivaroxa	
Overdue (active treatment)								
Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime	
Hope, Nuala	56346346	52	05/02/2013				Rivaroxa	
Patient, Perfect	324234343434	107	11/03/2013		NOAC Clinic			
Iffla, Lennie	57457964	62	30/04/2013					
Patient, Test	324325555	58	08/05/2013	08:05	Default clinic	Overdue		
Dooley, Roderick	345235235425	62	15/05/2013			Schedu		
Patient, Test	324325555	58	15/05/2013		Warfarin Clinic	Schedu		
Patient, Perfect	324234343434	107	15/05/2013	14:15		*Age > 75* Scheduled Dabigat		
Overdue (New treatment plan)								
Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime	
Balloon, Horace	12045204	62	13/05/2013		NOAC Clinic	Scheduled		
Grumble, Greta	5468756541		14/05/2013	15:10	NOAC Clinic	Overdue	Rivaroxa	
Overdue (stopped treatment plan)								
Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime	
Change, Charlie	C23123123	58	30/01/2013			Overdue	Dabigat	
Scheduled (active treatment plan)								
Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime	

The list of patients may be filtered by date of next follow-up / clinic location / risk class / patient group / diagnosis.

Click on the filters on the left of the list view screen to tailor the list you wish to view.

With	Overdue
All	e-mail patients (St Elsewhere)
High	
(All diagnoses)	
All	(All clinics)
Between	01/09/2012 30/09/2012

The Patient Search and Reports screens also provide searches on your DAWN database for patients on different anticoagulants.

[\(Overview page\)](#)

[\(Detailed Workflow page\)](#)

[\(Back to Workflows in DAWN page\)](#)

5.2 Integrated non-VKA / VKA patient record

The DAWN patient record accommodates treatments with warfarin and non-VKAs like Rivaroxaban. Each patient has a treatment plan when they start a particular anticoagulant treatment. The treatment plan defines the key elements of the treatment such as dose, duration, *etc.*





AC: Anticoagulation	
active	
Start date	27/02/2013
Duration	Indefinite
Target range	2.0 - 3.0 (2.5 Target)
Anticoagulant	Warfarin 1 and 5mg (in Tablets/Daily) with Halves
Referring GP	Central Surgery - Bloggs Frank
Consultant	-
stopped	
Start date	21/12/2012
Duration	Treatment stopped - Stopped at: 27/02/2013 16:32
Target range	Non-VKA
Anticoagulant	Rivaroxaban 20 mg Once Daily
Referring GP	Big Hospital - Support Dawn
Consultant	-
Cessation Reason	Side-effects

For Rivaroxaban the anticoagulation history is accessed from the 'Questionnaire' tab -

	QuestionnaireType	Entry date	Summary
	Rivaroxaban Follow Up	30/05/2013	
	Rivaroxaban Candidate	01/03/2013 10:00	GFR 68 mL/min - Dose: 20 mg once daily
	Dabigatran Initiation	15/01/2013	Contraindicated

(See below for [full questionnaire screen.](#))

For Warfarin, the 'History' tab shows details of the INR and dose history -

Graph	History	Personal	Treatment plans	Questionnaires	Test Results	Interface Warnings	
Date	INR	Dose	Dosing Instructions	Time	DNA	In range	Comment
Sat 24/09/2011	3.3	1.75 w	Sun Mon Tue Wed Thu Fri Sat 2 1½ 2 1½ 2 1½ 2 PILLS (1 MG SIZE) PER DAY	4 wk			Above range: 27%
Sat 03/09/2011	2.2	1.75 w	Sun Mon Tue Wed Thu Fri Sat 2 1½ 2 1½ 2 1½ 2 PILLS (1 MG SIZE) PER DAY	3 wk			
Sat 20/08/2011	2.1	1.75 w	Sun Mon Tue Wed Thu Fri Sat 2 1½ 2 1½ 2 1½ 2 PILLS (1 MG SIZE) PER DAY	2 wk			
Sat 13/08/2011	1.5	1.75 w	Sun Mon Tue Wed Thu Fri Sat 2 1½ 2 1½ 2 1½ 2 PILLS (1 MG SIZE) PER DAY	7 d			

[\(Overview page\)](#)

5.3 Questionnaires for non-VKA therapy management

Two structured questionnaires help you record all relevant details at the time Rivaroxaban is **Initiated** or on **Follow-up** reviews for your Rivaroxaban patient -

[Initiation Questionnaire](#)


This questionnaire helps to determine whether the patient is a suitable candidate for Rivaroxaban, and if so, what the appropriate dose of Rivaroxaban is.

[Follow-up Questionnaire](#)

This questionnaire can be used to audit whether the patient is taking the medication correctly and whether they have experienced any problems at all.

The questions cover

- Indications for Rivaroxaban therapy
- renal function including a calculator for Cockcroft-Gault estimate of CrCl
- records for other tests
- Contraindicated or Interacting drugs including other anticoagulants or platelet inhibitors
- a reminder to ensure INR is not too high if switching from a vitamin K antagonist
- Contraindicated conditions and Haemorrhagic Risks
- records for CHA₂DS₂VASc and HASBLED scores as appropriate
- notes for planned procedures or other comments
- Rivaroxaban dose

 **You should ensure that the questionnaire content is appropriate for the current recommendations drug manufacturer.**

A Follow-up may be scheduled for patients starting on Rivaroxaban and the history for questionnaires is easily viewed on the Questionnaires tab -



QuestionnaireType	Entry date	Summary
Rivaroxaban Follow Up	30/05/2013	
Rivaroxaban Candidate	01/03/2013 10:00	GFR 68 mL/min - Dose: 20 mg once daily

Patient details will appear on your Non-VKA list view when the date of the next follow-up is due.

[\(back to Overview page\)](#)

[\(back to Settings for Regime and Dose Settings page\)](#)

5.3.1 Rivaroxaban Initiation Questionnaire

Assessment as a Candidate for Rivaroxaban Initiation

Patient Name:	Test Patient	Date of completion:	31/05/2013 11:00
			31/05/2013  at: 11 : 00
			24hr format
			<small>NB Please check this appointment is made in your clinic diary or hospital administration system.</small>
NHS Number:		to be completed at	NOAC Clinic ▼
Unit No:	324325555	Status	Scheduled

Questions:

Therapeutic Indication: Atrial fibrillation nonvalvular ▼

NB Remember to schedule a follow-up questionnaire for this patient 6 months after the Rivaroxaban treatment plan is activated

If switching from VKA, is the INR still elevated? ☐ *Delay starting Rivaroxaban until INR<3.0 for AFNV*

Date of first Rivaroxaban dose: 

Measured Creatinine Clearance: mL/min Age (at due date): 58

eGFR: mL/min Gender: Male

Serum Creatinine: µmol/L Body Weight: kg

$$1.23 \times (140 - \text{age years}) \times \text{weight kg} \times (0.85 \text{ if female})$$

 serum creatinine µmol/L

Calculate Cockcroft-Gault CrCl

Cockcroft D, Gault MD. Nephron, 16:31-41, 1976

Please be aware of the limitations of estimates of renal function in relation to muscle mass, race and diet.
[Click to refer to dosing guidance with renal impairment](#)

Other Tests:

The following lists are for guidance only and are not exhaustive. Please use your clinical judgement before decision making.
[Click for more details on Xarelto](#)

Contraindicated Drugs* :

- ☐ OTHER ANTICOAGULANT (HEPARIN, DABIGATRAN,...)
- ☐ DRONEDARONE
- ☐ ITRACONAZOLE
- ☐ KETOCONAZOLE
- ☐ POSACONAZOLE
- ☐ RITONAVIR
- ☐ SINTHROME
- ☐ WARFARIN

Interacting drugs* :

- ☐ ASPIRIN
- ☐ CLARITHROMYCIN
- ☐ OTHER NSAIDs
- ☐ TELITHROMICIN
- ☐ VORICONAZOLE

Other anticoagulant or platelet inhibitor* :

Care is to be taken if patients are treated concomitantly with medicinal products affecting haemostasis

- ☐ Abciximab
☐ Eptifibatide
☐ Prasugrel
☐ Ticagrelor
☐ (Other)

If (other), please give details:

* These lists are for guidance only and are not exhaustive. Please use your clinical judgement before decision making.
[Click for more details on Xarelto](#)

Other contraindications* :

- ☐ Clinically significant active bleeding
☐ Creatinine clearance <15ml/min
☐ Hepatic impairment or liver disease expected to have any impact on survival
☐ Hypersensitivity to tablet excipients or galactose intolerance
☐ Paediatric Patient
☐ Pregnancy and breastfeeding
☐ Prosthetic Heart Valve

Haemorrhagic Risks*

- ☐ Active ulcerative gastrointestinal disease
☐ Bronchiectasis or history of pulmonary bleeding.
☐ Congenital or acquired coagulation disorder
☐ Intraspinal or intracerebral vascular abnormalities
☐ Recent brain, spinal or ophthalmological surgery
☐ Recent intracranial or intracerebral haemorrhage
☐ Uncontrolled severe arterial hypertension
☐ Vascular retinopathy

* These lists are for guidance only and are not exhaustive. Please use your clinical judgement before decision making.
[Click for more details on Xarelto](#)

CHADS₂ score? (None selected) ▼

C	Congestive heart failure	1
H	Hypertension (or treated hypertension)	1
A	Age older than 75 years	1
D	Diabetes mellitus	1
S	Previous stroke or transient ischaemic attack	2

HASBLED score? (None selected) ▼

H	Hypertension? systolic blood pressure > 160 mmHg or uncontrolled	1
A	Renal Disease? (creatinine > 200 µM or > 2.6 mg / dL)	1
	Liver Disease? (cirrhosis, bilirubin > 2xULN, AST/ALT/AP > 3xULN)	1
S	Stroke History?	1
B	Prior Major Bleeding or Predisposition to Bleeding?	1
L	Labile INR?	1
E	Age ≥ 65 years	1
D	Medication Usage Predisposing to Bleeding? (Antiplatelet agent / NSAIDs)	1
	Alcohol Usage History?	1

Procedures planned:

Who will follow your use of Rivaroxaban? (None selected) ▼

Age (at due date): 58

Dosing regime	Advice
Rivaroxaban 20 mg Once Daily	Recommended dose (maximum recommended)
Rivaroxaban 15 mg Once Daily	Recommended for moderate to severe renal impairment (15-49mL/min creatinine clearance)

Suggested dose: 20mg once daily with the evening meal

Please use your clinical judgement before deciding on the most appropriate dose. [Click for more details on Xarelto.](#)

Rivaroxaban Dose: (None selected) ▼

Comments:


Status: Scheduled

[Mark as complete](#)

⚠ Information in this questionnaire is used to influence dosing and therapy decisions. Please ensure all answers are accurate and complete.

[\(back to the Questionnaires page\)](#)

5.3.2 Rivaroxaban Follow-up Questionnaire


Rivaroxaban Follow Up			
Patient Name:	Horace Balloon	Date of completion:	31/05/2013 16:00
			<div>31/05/2013  at: 16 : 00</div> <div>24hr format</div>
		NB Please check this appointment is made in your clinic diary or hospital administration system.	
NHS Number:		to be completed at	NOAC Clinic ▼
Unit No:	12045204	Status	Scheduled
Therapeutic Indication: Atrial fibrillation nonvalvular			
NB Remember to schedule a follow-up questionnaire for this patient 6 months after the Rivaroxaban treatment plan is activated			
I have taken the correct dose every day	<input type="radio"/> No <input type="radio"/> Yes		
I might have taken too many capsules / tablets	<input type="radio"/> No <input type="radio"/> Yes		
I might have missed one or more doses	<input type="radio"/> No <input type="radio"/> Yes		
Notes:	<input type="text"/>		
I have started a new medication recently	<input type="radio"/> No <input type="radio"/> Yes		
Reasons for compliance problems:	<input type="checkbox"/> Dementia <input type="checkbox"/> Fear of side-effects <input type="checkbox"/> Gastrointestinal Bleed <input type="checkbox"/> Lack of information <input type="checkbox"/> Lives alone <input type="checkbox"/> Multiple medications <input type="checkbox"/> Prescriptions from several doctors		

Other:

Has the patient reported any adverse event (potentially due to current anticoagulant)?:

☐ Anaemia
☐ Bruising
☐ Change in colour of stools
☐ Epistaxis
☐ Haematoma
☐ Vomiting blood

NB Please follow local protocol for adverse event reporting to the relevant committee / agency / company.



Measured Creatinine Clearance: mL/min Age (at due date): 62

eGFR: 89 mL/min Gender: Male

Serum Creatinine: 75 µmol/L Body Weight: 65 kg

$$\frac{1.23 \times (140 - \text{age years}) \times \text{weight kg} (\times 0.85 \text{ if female})}{\text{serum creatinine } \mu\text{mol/L}}$$
 83 mL/min

Calculate Cockcroft-Gault CrCl

Cockcroft D, Gault MD. Nephron, 16:31-41, 1976

Please be aware of the limitations of estimates of renal function in relation to muscle mass, race and diet.
[Click to refer to dosing guidance with renal impairment](#)

Other Blood Checks:

Contraindicated Drugs* :	<input type="checkbox"/> OTHER ANTICOAGULANT (HEPARIN, DABIGATRAN,...) <input type="checkbox"/> DRONEDARONE <input type="checkbox"/> ITRACONAZOLE <input type="checkbox"/> KETOCONAZOLE <input type="checkbox"/> POSACONAZOLE <input type="checkbox"/> RITONAVIR <input type="checkbox"/> SINTHROME <input type="checkbox"/> WARFARIN
Interacting Drugs* :	<input type="checkbox"/> ASPIRIN <input type="checkbox"/> CLARITHROMYCIN <input type="checkbox"/> OTHER NSAIDs <input type="checkbox"/> TELITHROMICIN <input type="checkbox"/> VORICONAZOLE
Other anticoagulant or platelet inhibitor* :	<input type="checkbox"/> Abciximab <input type="checkbox"/> Eptifibatide <input type="checkbox"/> Prasugrel <input type="checkbox"/> Ticagrelor <input type="checkbox"/> (Other)
If (other), please give details:	<input type="text"/>
Other contraindications* :	<input type="checkbox"/> Clinically significant active bleeding <input type="checkbox"/> Creatinine clearance <15ml/min <input type="checkbox"/> Hepatic impairment or liver disease expected to have any impact on survival <input type="checkbox"/> Hypersensitivity to tablet excipients or galactose intolerance <input type="checkbox"/> Paediatric Patient <input type="checkbox"/> Pregnancy and breastfeeding <input type="checkbox"/> Prosthetic Heart Valve
Haemorrhagic Risks:*	<input type="checkbox"/> Active ulcerative gastrointestinal disease <input type="checkbox"/> Bronchiectasis or history of pulmonary bleeding. <input type="checkbox"/> Congenital or acquired coagulation disorder <input type="checkbox"/> Intrasplinal or intracerebral vascular abnormalities <input type="checkbox"/> Recent brain, spinal or ophthalmological surgery <input type="checkbox"/> Recent intracranial or intracerebral haemorrhage <input type="checkbox"/> Uncontrolled severe arterial hypertension <input type="checkbox"/> Vascular retinopathy
<p>* This list is for guidance only and is not exhaustive. Please use your clinical judgement before decision making.</p> <p>* These lists are for guidance only and are not exhaustive. Please use your clinical judgement before decision making.</p> <p>Click for more details on Xarelto</p>	

If (other), please give details:		<input type="text"/>
Other contraindications* :		<input type="checkbox"/> Clinically significant active bleeding <input type="checkbox"/> Creatinine clearance <15ml/min <input type="checkbox"/> Hepatic impairment or liver disease expected to have any impact on survival <input type="checkbox"/> Hypersensitivity to tablet excipients or galactose intolerance <input type="checkbox"/> Paediatric Patient <input type="checkbox"/> Pregnancy and breastfeeding <input type="checkbox"/> Prosthetic Heart Valve
Haemorrhagic Risks:*		<input type="checkbox"/> Active ulcerative gastrointestinal disease <input type="checkbox"/> Bronchiectasis or history of pulmonary bleeding. <input type="checkbox"/> Congenital or acquired coagulation disorder <input type="checkbox"/> Intraspinal or intracerebral vascular abnormalities <input type="checkbox"/> Recent brain, spinal or ophthalmological surgery <input type="checkbox"/> Recent intracranial or intracerebral haemorrhage <input type="checkbox"/> Uncontrolled severe arterial hypertension <input type="checkbox"/> Vascular retinopathy
* This list is for guidance only and is not exhaustive. Please use your clinical judgement before decision making.		
Click for more details on Xarelto		
Rivaroxaban Dose:		Rivaroxaban 20 mg Once Daily
		Suggested dose: 20mg once daily with the evening meal
Please use your clinical judgement before deciding on the most appropriate dose. Then update the treatment plan as required. Click for more details on Xarelto .		
Dosing regime	Advice	
Rivaroxaban 20 mg Once Daily	Recommended dose (maximum recommended)	
Rivaroxaban 15 mg Once Daily	Recommended for moderate to severe renal impairment (15-49mL/min creatinine clearance)	
Comments:		<input type="text"/>
Status: Scheduled		
Mark as complete		
! Information in this questionnaire is used to influence dosing and therapy decisions. Please ensure all answers are accurate and complete.		

[\(back to the Questionnaires page\)](#)

5.4 Help to follow recommended (SmPC - Summary of Product Characteristics) guidelines

In this section, the software alerts and dose recommendations are explained. DAWN has settings for drug-specific contraindications and approved dosing regimes which are used within the patient treatment plan and questionnaire to help the user adhere to the chosen guideline. The settings for risks, warnings and contraindications may be updated so that every review of the patient's anticoagulation is fully informed from the latest guidance.

DAWN will highlight the following on the questionnaire screen

[Contraindicated concomitant drugs](#) or conditions including impaired [renal function](#)

[Warnings on inconsistency and completeness](#) based on advanced age

[Dose warnings on discrepancies](#) in the recorded details

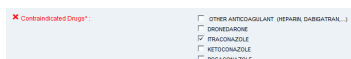
The system also performs some [validation checks](#) and highlights any discrepancies when the user activates a new non-VKA treatment plan.

[\(click here to go back to Overview page\)](#)

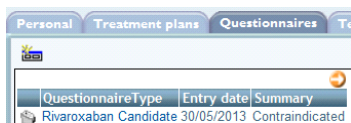
[\(back to FAQs page\)](#)

5.4.1 Contraindications

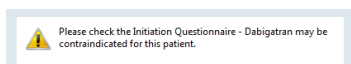
Contraindications are highlighted in **RED** on the Initiation Questionnaire and shown on the Questionnaires tab summary comment. Pop-ups will also highlight contraindications on attempting to proceed with a plan for Rivaroxaban.



Questionnaire screen shows a red X



Summary shows contraindicated



Pop-up warning example



The settings for contraindications may be updated as new medical evidence emerges using the Look Up Tables in DAWN.

[\(back to Help page\)](#)

5.4.2 Renal function

Renal impairment may affect the appropriate anticoagulant or dose and renal function may be recorded as measured creatinine clearance, estimated GFR or the Cockcroft-Gault estimation of creatinine clearance. DAWN provides a calculator for the Cockcroft-Gault estimation from serum creatinine and body weight.

Measured Creatinine Clearance:	<input type="text"/>	mL/min	Age (at due date):	<input type="text"/>	52
eGFR:	<input type="text"/>	mL/min	Gender:	<input type="text"/>	Male
Serum Creatinine:	<input type="text"/>	μmol/L	High Body Weight:	<input type="text"/>	69 kg

$1.23 \times (140 - \text{age years}) \times \text{weight kg} \times 0.85 \text{ if female}$	40 mL/min
$\frac{\text{serum creatinine } \mu\text{mol/L}}{\text{}} \times \text{}} $	
<input type="button" value="Calculate Cockcroft-Gault CrCl"/>	
<i>Cockcroft D, Gault MD. Nephron, 16:31-41, 1976</i>	

[\(back to Help page\)](#)

5.4.3 Warnings on inconsistency and completeness

Warnings are shown for the Suggested dose on the Rivaroxaban Initiation Questionnaire for age / renal impairment / other warnings.

Suggested dose: Rivaroxaban is contraindicated according to information recorded above.

✗ CONTRAINDICATED Use is not recommended

On activating a treatment plan for Rivaroxaban, several checks are made in the background and an error will highlight any discrepancy.

For example, DAWN will

- check that the patient has an appropriate Primary Diagnosis and highlight any not recognised as

therapeutic indications for the anticoagulant.

- check that the user has completed a Rivaroxaban Initiation Questionnaire listing drugs, conditions and test results.
- check the dose of Rivaroxaban is advised for the Primary Diagnosis.



The settings for warnings may be updated as new medical evidence emerges using the Look Up Tables in DAWN.

[\(back to Help page\)](#)

5.4.4 Dosing warnings

Dose options are clearly presented on DAWN for the patient's indication -

Therapeutic Indication:		DVT - Provoked
Dosing regime	Advice	
Rivaroxaban 15 mg Twice Daily	Normal Dose Day 1-21	
Rivaroxaban 20 mg Once Daily	Normal Dose Day 22 onwards (normal renal function to severe renal impairment CrCl \geq 15mL/min)	
Rivaroxaban 15 mg Once Daily	A reduction of the dose from 20mg once daily to 15 mg once daily should be considered if the patient's assessed risk for bleeding outweighs the risk for recurrent DVT and PE.	

The user chooses the dose from a drop-down menu -

Rivaroxaban Dose:	(None selected)
	(None selected)
	Rivaroxaban 15 mg Twice Daily
	Rivaroxaban 20 mg Once Daily
	Rivaroxaban 15 mg Once Daily

The dose is assigned for each patient using the Initiation Questionnaire and this links to the patient's treatment plan which must have the dose and Primary Diagnosis set as indicated in the questionnaire. If there is a discrepancy in the information entered for your patient, a warning is displayed on screen.



This dose is not appropriate for this therapeutic indication




The settings for dose options may be updated as new medical evidence emerges using the Look Up Tables in DAWN.

[\(back to Help page\)](#)

5.4.5 Overview of Validation Checks

Activation of a new treatment plan for non-VKA on DAWN triggers some background checks as follows.


 activate

If the user selects 'activate' and all checks pass the treatment plan is activated without error. If there is any discrepancy, an error message will indicate the problem and the user may correct the Initiation Questionnaire or the treatment plan or both and activate again. Should your DAWN settings need to be updated as new medical evidence emerges, please contact your system administrator.

Checks for non-VKA treatment plans -

- **the primary diagnosis is one known to be acceptable for the chosen drug and dose**

For example, you may have chosen 15mg twice daily for Rivaroxaban in an AF patient. If this regime is not permitted, it will not be possible to complete an Initiation Questionnaire with this combination and a treatment plan cannot be activated and a follow-up cannot be scheduled..

 DAWN AC performs 2 checks on every primary diagnosis. Firstly, the drug and diagnosis must be stored in your Look Up Tables as a Therapeutic indication like Rivaroxaban being acceptable as an anticoagulant in Atrial Fibrillation (non-valvular). Secondly, DAWN stores 'Permitted Regimes' for each diagnosis. So, several doses such as 15mg once daily or 20mg once daily may be acceptable but 15mg twice daily may not be acceptable for Rivaroxaban in Atrial Fibrillation (non-valvular).

- **the drug chosen is not a VKA anticoagulant**


For example, you may have chosen Warfarin mixed tablets regime and marked the treatment plan as non-VKA in the target range box.



You have selected a Non-Vitamin K Antagonist Target Range for an anticoagulant that is a Vitamin K Antagonist

- **the appropriate questionnaire has been completed BEFORE the treatment plan is activated**

For example, you may select a treatment plan for Rivaroxaban 20mg once daily but forget to go through the list of possible contraindications / interactions / risks. DAWN will prevent activation of the treatment plan and scheduling any follow-up until the questionnaire is completed.

 The requirement for a questionnaire is set in the Look Up Table called 'Questionnaire settings' and may be updated by your system administrator to add any required questionnaires for particular drugs.

- **the completed questionnaire has the same details as the treatment plan**

For example, you may select a treatment plan for Rivaroxaban 20mg once daily on the Initiation Questionnaire but choose Rivaroxaban 15mg once daily on the treatment plan.



You have selected a regime for 15 mg once daily but the Initiation Questionnaire records the intended dose as 20 mg once daily. Please correct the regime or amend the recommendation in the initiation questionnaire and include a comment to say why you are changing it.

[\(back to Help page\)](#)

[\(back to Settings for Regime and Dose Settings page\)](#)

5.5 Reporting on the non-VKA patient database

The powerful SQL reporting tools in DAWN can be configured to extract counts or lists of patients on certain anticoagulants. These reports may be used to assess recorded events in relation to the anticoagulant used.

[Example 1 Patient count by range, diagnosis and duration](#)

[Example 2 Events - all areas](#)

[\(click here to go back to Overview page\)](#)

5.5.1 Example 1

Report NPSA #7-8 Patient Cnt By Range, Diag and Duration ▼

Diagnosis

- 11111
- AF/CARDIOVERSION
- ANEURSYM
- ANEURSYM WITH EMBOLIC EPISODES
- ANGINA
- ANGIOPLASTY
- ANTI-PHOSPHOLIPID SYNDROME
- ANTITHROMBIN 111 DEFICIENCY

TargetRange

Non-VKA

- 1.5 - 2.5 (2.0 Target)
- 2.0 - 3.0 (2.5 Target)
- 2.5 - 3.5 (3.0 Target)
- 3.0 - 4.0 (3.5 Target)
- 3.0 - 4.5 (3.75 Target)
- 3.5 - 4.5 (4.0 Target)

[Show report](#)

[Download as XML](#)

[Download as Text](#)

Email address [Send](#)

Diagnosis	Target INR	Duration of Therapy	Count	Total	% of Total
Atrial fibrillation nonvalvular	0	Indefinite	2	4	50
Total hip replacement surgery	0	Indefinite	2	4	50

[\(back to reporting page\)](#)

5.5.2 Example 2

Report: EVENTS - all areas

Event Severity: Minor, Moderate (No Hospitalisation), Moderate (Hospitalisation), Major (Hospitalisation), Fatal

Within How Many Days Of TP Start Date: 90

Events: Bleed lower GI, Bleed upper GI, Bleeding - any other site, Bruising, unexplained, Cerebral haemorrhage, Cerebral vascular accident, Deep vein thrombosis, Diarrhoea and vomiting

Anticoagulant: Dabigatran 150 mg once daily

Show report, Download as XML, Download as Text, Email address, Send

Event date	Therapy	Status	Name	DOB	NHS Number	MRN	Event	Severity
03/09/2012	Dabigatran 150 mg once daily	Current	Lancaster, Eric	12/06/1934		9876542	Cerebral vascular accident	Major (Hospitalisation)

[\(back to reporting page\)](#)

5.6 Other Non-VKA agents / Questionnaires

Please note this module can provide support separately for other agents besides Rivaroxaban through specifically-designed questionnaires for each agent. Please call for a quotation.

Also, future releases for the DAWN Rivaroxaban module are planned to include a questionnaire for perioperative situations.

Contact 4S DAWN Clinical Software for more information at sales@4s-DAWN.com / support@4s-DAWN.com / 015395 63091.

[\(click here to go back to Overview page\)](#)

Part

VI

6 Detailed Workflow

The following workflow describes how to add and deal with a new patient on non-VKA therapy or edit an existing warfarin patient so that are logged as being on non-VKA therapy. The essential steps in recording non-VKA anticoagulation are as follows -

1. Check if the patient details are already on DAWN (see [patient search](#))



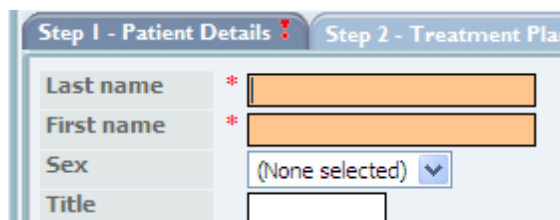
Selection: Active patients | Patients with active Treatment


Search for: Last name:

Town:

Date of birth: 


2. [Add the patient details](#) (identification numbers, name and address, etc) or update a previous record as required



Step 1 - Patient Details  Step 2 - Treatment Plan

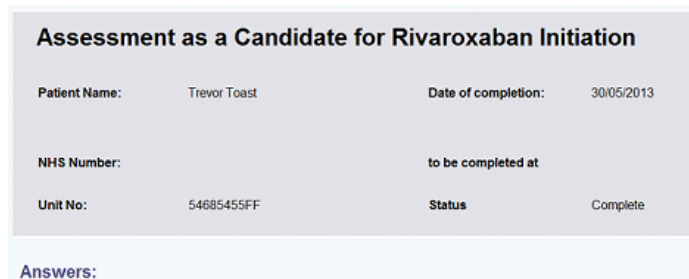
Last name *

First name *

Sex (None selected) 

Title

3. Complete an [Initiation Questionnaire](#)



Assessment as a Candidate for Rivaroxaban Initiation

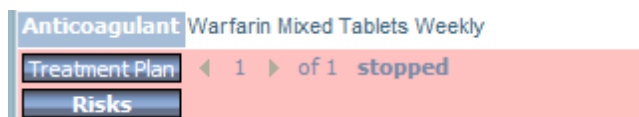
Patient Name: Trevor Toast Date of completion: 30/05/2013

NHS Number: to be completed at



Unit No: 54685455FF Status Complete

Answers:

4. [Stop any existing treatment plan](#) (for other anticoagulant or dose)




Anticoagulant Warfarin Mixed Tablets Weekly

Treatment Plan  1  of 1 stopped

Risks

5. [Activate a treatment plan](#) for the chosen anticoagulant and dose

Balloon, Horace - 01/01/1951 - 12045204

Risk class	High	
Pref. clinic	NOAC Clinic (Big Hospital)	
Phone	015395 63091 - home	
Age	62	
Diagnosis	Atrial fibrillation nonvalvular	
Target Range	Non-VKA	
Start date	13/05/2013 - Indefinite	
Anticoagulant	Rivaroxaban 20 mg Once Daily	
Treatment Plan	◀ 1 ▶ of 1 active	
Risks	poor compliance	

6. Schedule the next follow-up as a [Follow Up Questionnaire](#)

PersonalTreatment plansQuestionnairesTest Results

	QuestionnaireType	Entry date	Summary
	Rivaroxaban Follow Up	30/05/2013	
	Rivaroxaban Candidate	01/03/2013 10:00	GFR 68 mL/min - Dose: 20 mg once daily

7. See the [FAQs page](#) for some common queries on the Non VKA Workflow



HINT

Don't forget to chase patients due for follow-up at regular intervals! - you'll find them listed on the [list view for Non-VKA](#).

At some time you may need to -

[Change the dose of anticoagulant](#)

[Switch to a different anticoagulant](#)

[Stop the current anticoagulation record](#)

Mark the patient as inactive / deceased

In order to keep track of all your patients, you will need to follow the [daily / weekly routines](#) to check for patients overdue for follow-up or not yet actively treated.

6.1 Initiation Questionnaire

For anticoagulants such as Rivaroxaban, you may wish to always complete an Initiation Questionnaire before activating a treatment plan on DAWN. You can add a Rivaroxaban Initiation Questionnaire to any patient from the Questionnaires tab.

Alderson, Eddie - 02/03/1947 - D78137 - 12 ROCKCLIFFE GDNS , WEST YORKS

Risk class: Low
 Pref. clinic: (None selected)
 Phone: 111-222-4444 - home
 Age: 65

Diagnosis: ...
 Target Range:
 Start date: 27/04/2012 -
 Anticoagulant:
 Treatment Plan: 2 of 2 New
 Risks:

There is no next appointment or active treatment to show.
 Next appointment date: [] Create next appointment

click on the yellow star to add a questionnaire for this patient

History Personal Treatment plan **Questionnaires**

There are no items to display

The 'Due Date' will default to today but you can change this if you wish. If you are not ready to answer all the questions, simply click OK and the details may be completed later.

The questions cover

[Indications](#) for Rivaroxaban therapy

[Renal function](#) including a calculator for Cockcroft-Gault estimate of CrCl

[Contraindicated](#) or [Interacting drugs](#) including other anticoagulants or platelet inhibitors

A reminder to ensure INR is not inappropriately elevated if switching from a vitamin K antagonist

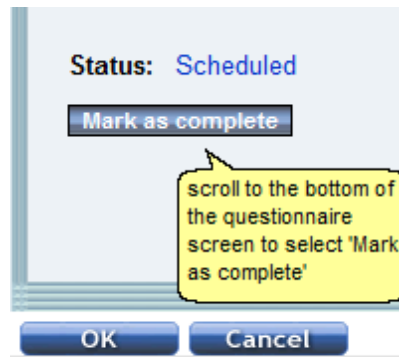
[Contraindicated conditions](#) and [Haemorrhagic Risks](#)

Records for [CHA2DS2VASc](#) and [HASBLED scores](#)

Notes for planned procedures or other comments

Rivaroxaban [dose](#)

Once you have answered all sections, click on 'Mark as complete' at the bottom of the questionnaire.



[\(back to Integrated non-VKA / VKA patient record\)](#)

[\(back to Detailed Workflow page\)](#)

[\(back to Settings for Regime and Dose Settings page\)](#)

6.1.1 Schedule an Initiation (non-VKA)

On adding an Initiation Questionnaire, change the 'Due Date' to the date you will complete the details.

Assessment as a Candidate for Rivaroxaban Initiation

Patient Name:	Test Patient	Date of completion:	31/05/2013 11:00
			<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">31/05/2013</div> <div style="display: inline-block; vertical-align: middle;">at</div> <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">11 : 00</div> <div style="margin-left: 10px;">24hr format</div>
			<small>NB Please check this appointment is made in your clinic diary or hospital administration system.</small>
NHS Number:		to be completed at	NOAC Clinic ▼
Unit No:	324325555	Status	Scheduled

Click OK at the bottom of the Questionnaire screen to save this Initiation with the scheduled date.



You will find the questionnaire on the questionnaires tab for later completion.



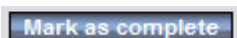
[\(back to Initiation Questionnaire page\)](#)

6.1.2 Complete an Initiation Questionnaire

The Initiation questionnaire is structured to help you record all relevant details at the time Rivaroxaban therapy is started. See [details of the Initiation Questionnaire](#).



If you cannot answer some questions, simply click OK or Save and come back later to complete the answers.

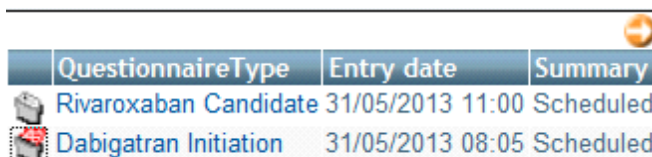


On marking the answers as complete you are confirming that DAWN can store this record, display a summary on the questionnaires tab and check details against the treatment plan.

If you've added some details in error, Cancel your changes using 'Cancel' or the rewind button at the top of the screen -

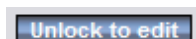


If you need to delete a questionnaire completely, look for the bin symbol on the questionnaires tab and save before confirming you wish to delete this record-



If you need to add more information or adjust the Initiation Questionnaire which is already completed -

1. locate the completed questionnaire on the Questionnaires tab
2. select Unlock to edit



3. save your changes

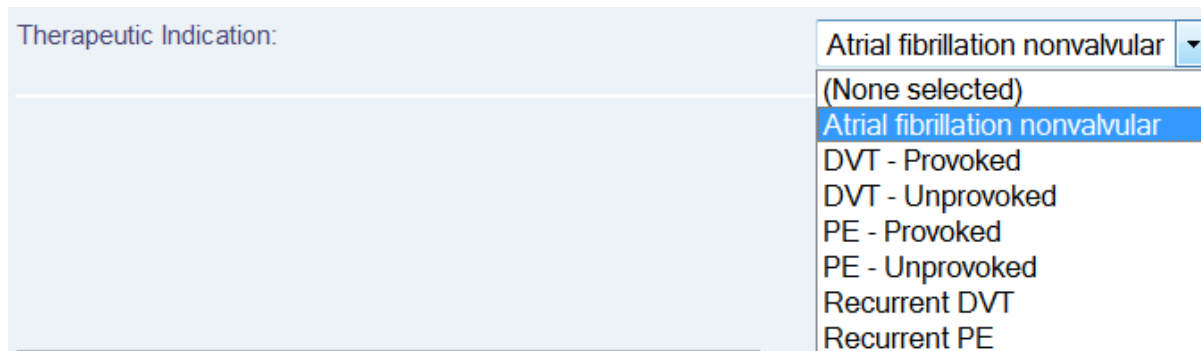
NB - unlocking a previous questionnaire to edit it may cause the details to be updated with subsequent changes to the patient details. For example, if the patient was previously on an interacting drug which was later removed from your DAWN database, the drug would still be stored in the old completed questionnaire. On unlocking the old questionnaire, the record for this drug may no longer be available.

[\(back to Initiation Questionnaire page\)](#)

6.1.2.1 Therapeutic Indication

The dropdown menu for **Therapeutic indication** displays options for the primary diagnosis. The available options are those set for any anticoagulant in the Lookup Tables as 'Therapeutic Indications'.

Selection of the most relevant therapeutic indication for your patient is recommended. If you are unsure, you might wish to complete this later.



Therapeutic Indication:

- Atrial fibrillation nonvalvular
- (None selected)
- Atrial fibrillation nonvalvular
- DVT - Provoked
- DVT - Unprovoked
- PE - Provoked
- PE - Unprovoked
- Recurrent DVT
- Recurrent PE

See Lookup Tables to adjust the options displayed in this dropdown.

[\(back to Initiation Questionnaire page\)](#)

[\(back to Settings for New Oral Anticoagulants page\)](#)

6.1.2.2 Renal function

Estimates of renal function may be recorded in several ways on the Initiation Questionnaire and these will be used to modify the suggested dose where renal function is severely impaired or not recorded.

- measured creatinine clearance (laboratory estimation)
- Estimated Glomerular Filtration Rate (eGFR)
- serum creatinine
- Cockcroft-Gault estimation of creatinine clearance
- other measures may be recorded in the notes box

DAWN provides a calculator for estimating renal function from serum creatinine and body weight. Enter these 2 values and click on the '**Calculate Cockcroft-Gault CrCL**'.

Measured Creatinine Clearance:	<input type="text"/>	mL/min	Age (at due date):	62
eGFR:	<input type="text" value="89"/>	mL/min	Gender:	Male
Serum Creatinine:	<input type="text" value="75"/>	μmol/L	Body Weight:	<input type="text" value="65"/> kg

$$\frac{1.23 \times (140 - \text{age years}) \times \text{weight kg} (\times 0.85 \text{ if female})}{\text{serum creatinine } \mu\text{mol/L}}$$

83 mL/min

Calculate Cockcroft-Gault CrCl

Cockcroft D, Gault MD. Nephron, 16:31-41, 1976

Please be aware of the limitations of estimates of renal function in relation to muscle mass, race and diet.
[Click to refer to dosing guidance with renal impairment](#)

Other Blood Checks:

Note - if you have a laboratory estimation which is less than a numeric value (like <10), please enter the number (like 10) in the Measured Creatinine Clearance, eGFR or Serum Creatinine boxes. Similarly for results which are reported as greater than a value (like > 220), please enter the numeric value (like 220). The limits used for renal impairment are set as follows in DAWN -

- Severe renal failure is defined as measured creatinine clearance or estimated glomerular filtration rate or Cockcroft-Gault estimation of CrCl less than 15mL/min.
- If more than one measure of renal function is entered, measured creatinine clearance is considered in preference to estimated glomerular function rate in preference to Cockcroft-Gault estimation of creatinine clearance
- Moderate to severe renal impairment is defined as measured creatinine clearance = 15-50 L/min or estimated glomerular filtration rate = 15-60 mL/min or Cockcroft-Gault estimation of CrCl = 15-50 /min

The DAWN system alerts you if you add an unusually low or high serum creatinine or body weight measurement. If you get a warning message, please check the details you entered carefully.

[\(back to Initiation Questionnaire page\)](#)

6.1.2.3 Contraindicated drugs

Some concomitant drugs may be known to be contraindicated for the chosen anticoagulant as published in the prescribing guidelines. Please tick any drugs if your patient is currently prescribed this drug.

- ☐ OTHER ANTICOAGULANT (HEPARIN, DABIGATRAN,...)
- ☐ DRONEDARONE
- ☐ ITRACONAZOLE
- ☐ KETOCONAZOLE
- ☐ POSACONAZOLE
- ☐ RITONAVIR
- ☐ SINTHROME
- ☐ WARFARIN

The list of drugs displayed are defined in the Look Up Tables on your DAWN database and additional drugs may be added to this list as required. Please contact your system administrator to add new drug settings to the 'Interacting Drugs' table.

[\(back to Initiation Questionnaire page\)](#)

[\(back to FAQs page\)](#)

[\(back to Interacting Drugs Settings page\)](#)

6.1.2.4 Interacting drugs

Some interacting drugs may be known to increase the haemorrhagic risk if used along with the chosen anticoagulant. See relevant published prescribing guidelines. Please tick any drugs if your patient is currently prescribed this drug.

- ☐ ASPIRIN
- ☐ CLARITHROMYCIN
- ☐ OTHER NSAIDs
- ☐ TELITHROMICIN
- ☐ VORICONAZOLE

[\(back to Initiation Questionnaire page\)](#)

[\(back to Interacting Drugs Settings page\)](#)

6.1.2.5 Other anticoagulant or platelet inhibitor

It is important to record any other anticoagulant or platelet inhibitor prescribed along with Rivaroxaban even if this for a short period.

Other anticoagulant or platelet inhibitor* : Care is to be taken if patients are treated concomitantly with medicinal products affecting haemostasis	<input type="checkbox"/> Abciximab <input type="checkbox"/> Eptifibatide <input type="checkbox"/> Prasugrel <input type="checkbox"/> Ticagrelor <input type="checkbox"/> (Other)
If (other), please give details:	<input style="width: 350px; height: 20px;" type="text"/>

The list of drugs displayed may be added to or edited in the General Lookup Category for 'Anticoagulant or Platelet Inhibitors' - please contact your system administrator to arrange changes to the displayed options.

[\(back to Initiation Questionnaire page\)](#)

6.1.2.6 Switching from VKA

If your patient is switching from warfarin (or other vitamin K antagonist) to Rivaroxaban, please check the latest INR result and tick the box if it is above the recommended limit.

If switching from VKA, is the INR still elevated? <input type="checkbox"/>	<div style="border: 1px solid #ccc; width: 340px; height: 40px; margin-top: 5px;"></div>	<i>Delay starting Rivaroxaban until INR<3.0 for AFNV</i> <i>Delay starting Rivaroxaban until INR<2.5 for DVT and prevention of recurrent DVT and PE</i>
--	--	--

[\(back to Initiation Questionnaire page\)](#)

6.1.2.7 Other contraindications

Please tick any of the other contraindications which apply to your patient. These risks are identified in prescribing guidelines as contraindications for dosing with Rivaroxaban.

Other contraindications* :	<input type="checkbox"/> Clinically significant active bleeding <input type="checkbox"/> Creatinine clearance <15ml/min <input type="checkbox"/> Hepatic impairment or liver disease expected to have any impact on survival <input type="checkbox"/> Hypersensitivity to tablet excipients or galactose intolerance <input type="checkbox"/> Paediatric Patient <input type="checkbox"/> Pregnancy and breastfeeding <input type="checkbox"/> Prosthetic Heart Valve
----------------------------	---

The list of contraindications displayed on the Initiation Questionnaire may be edited / added to by your system administrator using the Look Up Tables called Risks and Specific Risks.

NB - any risks identified on the Initiation Questionnaire will **NOT** automatically display at the top-left of your patient screen. You may wish to highlight these manually on the patient screen either by [adding Risks for a new patient](#) or clicking on the 'Risks' button to add risks for an existing patient screen.

Risk class	Tests ordered
Pref. clinic	NOAC Clinic (Big Hospital)
Phone	015395 63091 - home
Age	72
Diagnosis	Atrial fibrillation nonvalvular ...
Target Range	Non-VKA
Start date	21/12/2012 -
Anticoagulant	Rivaroxaban 20 mg Once Daily
Treatment Plan	◀ 1 ▶ of 1 New
Risks	

[\(back to Initiation Questionnaire page\)](#)

[\(back to Risk Settings page\)](#)

6.1.2.8 Haemorrhagic risks

Please tick any of the risks which apply to your patient. These risks are identified in prescribing guidelines as significant risks for consideration in dosing decisions for Rivaroxaban.

Haemorrhagic Risks*	
<input type="checkbox"/>	Active ulcerative gastrointestinal disease
<input type="checkbox"/>	Bronchiectasis or history of pulmonary bleeding.
<input type="checkbox"/>	Congenital or acquired coagulation disorder
<input type="checkbox"/>	Intraspinal or intracerebral vascular abnormalities
<input type="checkbox"/>	Recent brain, spinal or ophthalmological surgery
<input type="checkbox"/>	Recent intracranial or intracerebral haemorrhage
<input type="checkbox"/>	Uncontrolled severe arterial hypertension
<input type="checkbox"/>	Vascular retinopathy

The list of haemorrhagic risks may be edited / added to by your system administrator using the Look Up Tables called Risks and Specific Risks.

NB - any risks identified on the Initiation Questionnaire will **NOT** automatically display at the top-left of your patient screen - see [adding Risks for a new patient](#) section or click on 'Risks' button to add risks on the patient screen.

Risk class	Tests ordered
Pref. clinic	NOAC Clinic (Big Hospital)
Phone	015395 63091 - home
Age	72
Diagnosis	Atrial fibrillation nonvalvular ...
Target Range	Non-VKA
Start date	21/12/2012 -
Anticoagulant	Rivaroxaban 20 mg Once Daily
Treatment Plan	◀ 1 ▶ of 1 New
Risks	

[\(back to Initiation Questionnaire page\)](#)

[\(back to FAQs page\)](#)

[\(back to Risk Settings page\)](#)

6.1.2.9 Rivaroxaban Dose

The dose recorded on the Initiation Questionnaire may be chosen from any regime for this anticoagulant on DAWN.

Dosing regime	Advice
Rivaroxaban 20 mg Once Daily	Recommended dose (maximum recommended)
Rivaroxaban 15 mg Once Daily	Recommended for moderate to severe renal impairment (15-49mL/min creatinine clearance)

Suggested dose: 20mg once daily with the evening meal

Please use your clinical judgement before deciding on the most appropriate dose. [Click for more details on Xarelto.](#)

Rivaroxaban Dose: Rivaroxaban 15 mg Once Daily

(None selected)
 Rivaroxaban 20 mg Once Daily
 Rivaroxaban 15 mg Once Daily

This screen shows advice for permitted regimes set for the chosen Therapeutic Indication (at the top of this questionnaire). To update or change the displayed options, request that your system administrator edits the settings for [Anticoagulation Tables](#).

[\(back to Initiation Questionnaire page\)](#)

6.1.2.10 CHADS and HASBLED scores

CHADS2 and HASBLED scores may be optionally recorded from the dropdown menus on your questionnaire.

CHADS₂ score?

C	Congestive heart failure	1
H	Hypertension (or treated hypertension)	1
A	Age older than 75 years	1
D	Diabetes mellitus	1
S	Previous stroke or transient ischaemic attack	2

(None selected)

0
1
2
3
4
5
6

HASBLED score?

(None selected)

(None selected)

0: Risk was 0.9% in one study
1: Risk was 3.4% in one study
2: Risk was 4.1% in one study
3: Risk was 5.8% in one study
4: Risk was 8.9% in one study
5: Risk was 9.1% in one study
6: Risk not known - too little data
7: Risk not known - too little data
8: Risk not known - too little data
9: Risk not known - too little data


The dropdown options are provided from the settings in your DAWN Normal Tables, General Lookup Category (CHADS2 Score and HASBLED). You may wish to request that your system manager updates the options available.

[\(back to Initiation Questionnaire page\)](#)

6.2 Non-VKA treatment plan

Non-vitamin K antagonist therapy is recorded on DAWN using a new treatment plan.

Blue, Brian - 04/04/1946 - 342523555 - 4 T

Risk class	High	
Pref. clinic	NOAC Clinic (Big Hospital)	
Phone	015395 63091 - home	
Age	67	
Diagnosis	Recurrent DVT ...	Non-VKA therapies have a target range of 'Non-VKA' rather than an INR range
Target Range	Non-VKA	
Start date	03/01/2013 - Indefinite	Chosen dose is displayed on the main patient screen as the Anticoagulant
Anticoagulant	Rivaroxaban 20 mg Once Daily	
Treatment Plan	1 2 of 2 active	Your patient may have a series of treatment plans but only one may be currently active
Risks	poor comp	

Any significant change in the patient's anticoagulation management should be recorded by stopping the existing treatment plan and starting a new treatment plan.

NB – DAWN will prevent a change of anticoagulant within an active treatment plan and require any existing treatment plan to be stopped.

DAWN provides INR and dosing screens for VKA (like warfarin) and questionnaires for non-VKA management. Each Questionnaire can be scheduled in advance and completed to store the important information for your patient. Complete all sections and mark as complete.

See sections on changing treatment plan / stopping a treatment plan / [starting a treatment plan for a new patient](#) / [viewing patient history](#).

[\(back to Detailed Workflow page\)](#)

6.2.1 Starting a non-VKA treatment plan

The steps to starting a treatment plan for your patient on DAWN are outlined below as are the essential information you need for the treatment plan.

STEPS -

1. Add your patient to DAWN (see [how to add a patient record](#)) AND add an initiation questionnaire. If your patient already has a record on DAWN, ensure any other anticoagulation treatment plan is stopped and click on Treatment Plan and 'New' to add a new treatment plan.

If your patient has no record on DAWN, the New button on the Patient Search screen will take you to the following 'New Patient Wizard' screen.

New Patient Wizard

Step 1 - Patient Details | **Step 2 - Treatment Plan Details** | Step 3 - Next

Disease area: Anticoagulation

Primary diagnosis: AFNR - Atrial fibrillation nonvalv

AC Therapy: ☐ Induction ☒ Maintenance ☐ Manual/Bridging

Target range: Non-VKA

Regime: (None selected)

Induction algorithm: (None selected)

Start date: 06/09/2012

Duration type: (None selected)

Duration: Weeks Days

First seen date:

Preferred clinic: (None selected)

Preferred time: From To

Next test date:

Laboratory: (None selected)

☐ Set the status of the TreatmentPlan to Active (Requires a Diagnosis, Target range, and Preferred time)

☐ Set the status of the TreatmentPlan to Admitted

☐ Set the status of the TreatmentPlan to Decide later

☒ Decide later

< Previous step | **Finish**

Annotations:

- the Regime can be selected here or decided later (once Initiation Questionnaire completed)
- choose a duration type
- always choose 'Decide later' for non-VKA then click 'Finish'

2. Activate a treatment plan


Watters, Wilma - 04/09/1912 - 33243434 - 4 The Square

Risk class: Low
 Pref. clinic: (None selected)
 Phone: - home
 Age: 100

Diagnosis: Atrial fibrillation nonvalvular
 Target Range: Non-VKA
 Start date: 04/09/2012
 Anticoagulant: [None selected]
 Treatment Plan: 1 of 1 New
 Risks: [None selected]

2. Click on the Treatment Plan link here and then click on the Activate button to activate.

This therapy is managed using Questionnaires.
 To schedule a questionnaire:

1. Press the  button on the Questionnaires
2. Set the status to "Scheduled".
3. Set the due date as appropriate.

Personal Treatment plans Questionnaires Test Results

There are no items in this list.

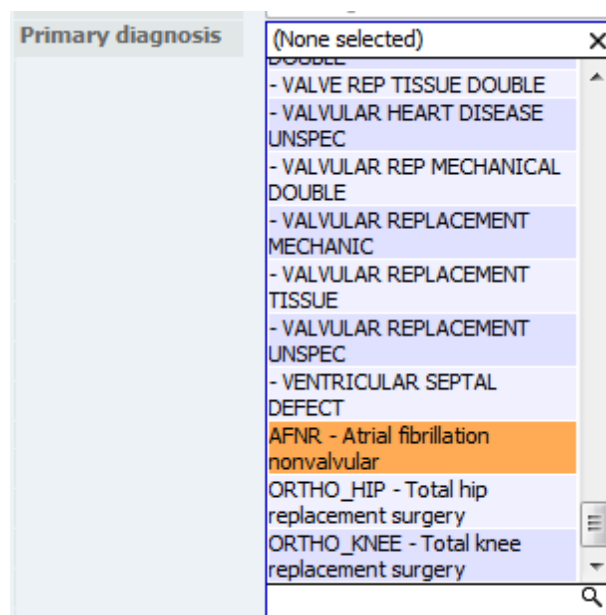
1. add an Initiation Questionnaire

St Elsewhere - Support Dawn 04/09/2012 14:08
 Referring GP updated to St Elsewhere - Support Dawn

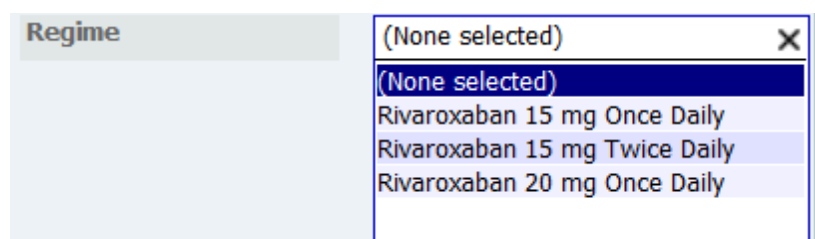
3. Schedule a [Follow-up questionnaire](#)

The essential choices on a DAWN treatment plan are

- **Primary diagnosis** - must be listed as a therapeutic indication for the non-VKA anticoagulant agent (contact your system administrator if you have problems activating your treatment plan).



- **Target range** - must be 'non-VKA' for non vitamin K antagonists
- **Regime** - choose the dose



- **Duration type** - short term requires a duration / long term has no duration

The treatment plan may not be activated without these selections but, if you do not have the details at hand, you can save the treatment plan and activate it later.

[\(back to Detailed Workflow page\)](#)

[\(back to FAQs page\)](#)

6.2.2 Changing a non-VKA treatment plan



It is strongly recommended that you stop the treatment plan and start a new treatment plan for any significant change in the patient's anticoagulation.

For example,

- changing dose from 20mg once daily to 15mg once daily


Personal		Treatment plans		Questionnaires		Test Results	
AC: Anticoagulation							
New							
Start date	25/02/2013						
Duration							
Target range	Non-VKA						
Anticoagulant	Rivaroxaban 20 mg Once Daily						
Referring GP	Central Surgery - Bloggs Frank						
Consultant	-						
stopped							
Start date	09/01/2013						
Duration	Treatment stopped - Stopped at: 09/01/2013 10:19						
Target range	Non-VKA						
Anticoagulant	Dabigatran 150 mg Twice Daily						
Referring GP	Central Surgery - Bloggs Frank						
Consultant	-						
Cessation Reason	Side-effects						

or

- changing the reason for anticoagulation

Treatment plans for Trouble Trevor (01/01/1932)				
Disease area	PrimaryDiagnosis	Start date	Duration in weeks	Status
Anticoagulation ORTHO_HIP - Total hip replacement surgery (13/09/2012)		06/09/2012	12	New
Anticoagulation AFNR - Atrial fibrillation nonvalvular (30/08/2012)		30/08/2012		stopped

For changes such as a change to clinic or duration of treatment, click on Treatment plan to edit and save your changes.

 Any changes to the treatment plan will be audited in the 'Audit' tab on the Treatment Plan screen like this -

ChangeDateTime	FieldName	FromValue	ToValue
06/09/2012 14:01	fkiPreferredClinicID	Default Clinic (St Elsewhere)	Postal Clinic (St Elsewhere)
06/09/2012 14:01	iDurationInWeeks	12	14

[\(back to Detailed Workflow page\)](#)

6.2.3 Stopping a non-VKA treatment plan

For any significant change to a patient's anticoagulation, such as changing drug or restarting after a period on different or no anticoagulation, please stop the treatment plan and start a new treatment plan.

1. click on Treatment plan on the Patient screen
2. select a Cessation reason - mandatory only if cessation reasons are available on your DAWN database.
(this option may not be set up for your DAWN AC system)
3. click on stop
4. click on OK to the pop-up box.

List view Patient Treatment plans X

Treatment plans for Black Carmella (01/01/1942)

Disease area	PrimaryDiagnosis	Status
Anticoagulation	ORTHO_KNEE - Total knee repl	active

Disease area	Anticoagulation
PrimaryDiagnosis	ORTHO_KNEE - Total knee repl
Start date	06/09/2012 First seen date
Duration type	Short Term
Duration	12 Weeks 0 Days 12 wks. Due to stop: 29/11/2012
Preferred clinic	(None selected)
Preferred time	From until
CessationReason	Patient decision
Status	active suspend stop Admit

Are you sure you want to perform the action 'stop' on record 'Anticoagulation: 06/09/2012'?

You can give a short explanation in the text-field below (optional)

[OK] [Cancel]

i Hint - add relevant details in the Notes tab as they will be easily viewed later on the Treatment Plans tab of the main patient screen like this.

Disease area	Anticoagulation
PrimaryDiagnosis	ORTHO_KNEE - Total knee repl:
Start date	06/09/2012 First seen date
Duration type	Short Term
Duration	12 Weeks <input type="text"/> Days <input type="text"/> 12 wks. Due to stop: 29/11/2012
Preferred clinic	(None selected)
Preferred time	From <input type="text"/> until <input type="text"/>
CessationReason	Patient decision
Status	active <input type="button" value="suspend"/> <input type="button" value="stop"/> <input type="button" value="Admit"/>

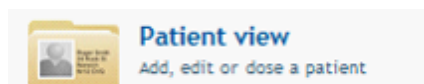
increasing GI upset - switching to warfarin for remaining 4 weeks (GP informed)


Graph	History	Personal	Treatment plans	Questionnaires	Test Results	Interface Warnings
AC: Anticoagulation						
New						
Start date	25/10/2012					
Duration						
Target range	2.0 - 3.0 (2.5 Target)					
Anticoagulant	Warfarin 1mg Strength (in Tablets / Daily Avg)					
Referring GP	-					
Consultant	-					
stopped						
Start date	06/09/2012					
Duration	Treatment stopped - Stopped at: 25/10/2012					
Target range	Non-VKA					
Anticoagulant	Dabigatran 220 mg once daily					
Referring GP	-					
Consultant	-					
Notes	increasing GI upset - switching to warfarin for remaining 4 weeks (GP informed)					
Cessation Reason	Patient decision					

[\(back to Detailed Workflow page\)](#)

6.3 Follow-up Questionnaire

To review the dose for a patient on Rivaroxaban or other non-VKA agent, locate the patient record using either the search facility or the list view.




List view / Daily routines
 Attendance and non-attendance

Worklist Procedures Non-VKA Status Annual Review Reminders Events Reviews Procedures (DVT)

Filter With Scheduled & Overdue
 14 records found.

None Scheduled (New treatment plan)

Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime
Change, Charlie	C23123123	58					Rivaroxaban 20 mg Once D
Lamb, Spring	3542543345354	72					Rivaroxaban 20 mg Once D

Overdue (active treatment plan)

Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime
Hope, Nuala	56346346	52	05/02/2013				Rivaroxaban 20 mg Once D
Patient, Perfect	3242343434	107	11/03/2013		NOAC Clinic		Dabigatran 110 mg Twice D
Iffla, Lennie	57457964		30/04/2013				Rivaroxaban 15 mg Twice f
Patient, Test	324325555						Warfarin 1 and 5mg (in Tab
Dooley, Roderick	34523523						Dabigatran 110 mg Twice D
Patient, Test	324325555	58	15/05/2013		Warfarin Clinic Scheduled		Warfarin 1 and 5mg (in Tab
Patient, Perfect	324234343434	107	15/05/2013 14:15			*Age ALERT* Scheduled Dabigatran 110 mg Twice D	

Overdue (New treatment plan)

Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime
Balloon, Horace	12045204	62	13/05/2013		NOAC Clinic	Scheduled	
Grumble, Greta	5468756541		14/05/2013 15:10		NOAC Clinic	Overdue	Rivaroxaban 15 mg Once D

Overdue (stopped treatment plan)

Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime
Change, Charlie	C23123123	58	30/01/2013				an 150 mg Twice D

Scheduled (active treatment plan)

Name	Hospital no.	Age	Appointment	Time	Clinic	Summary	Regime
Blue, Barbara-Jayne	342523555	67	15/08/2013				xaban 20 mg Once D

Scheduled (New treatment plan)

Simply click to see the full patient

'Scheduled' means a future date has been set for completion of a questionnaire for this patient record

Once you locate the patient record

[complete a Follow-up Questionnaire](#)

AND

[add another Follow-up questionnaire](#) scheduled for the next review date.

[\(back to Complete a Follow-up page\)](#)

[\(back to Detailed Workflow page\)](#)

6.3.1 Schedule a Follow-up (Non-VKA)

Black, Sarah - 06/03/1932 - HY8997430 - 14 Foundry Lane, BlackTown

Risk class: **High**
 Pref. clinic: **NOAC Clinic (Big Hospital)**
 Phone: **015395 63091 - home**
 Age: **81**
 Diagnosis: **Atrial fibrillation nonvalvular ...**
 Target Range: **Non-VKA**
 Start date: **14/05/2013 - Indefinite**
 Anticoagulant: **Rivaroxaban 20 mg Once Daily**
 Treatment Plan: **1 of 1 active**
 Risks: **...**

Questionnaires (highlighted with a red circle)

Click on the yellow star to add a questionnaire for this patient

QuestionnaireType	Entry date	Summary
Rivaroxaban Candidate	30/05/2013 11:15	GFR 68 mL/min - Dose: 20 mg once daily

On adding an Follow-up Questionnaire, change the 'Due Date' to the date you will complete the details.

Rivaroxaban Follow Up

Patient Name: Sarah Black **Date of completion:** 06/06/2013 11:00

Click OK at the bottom of the Questionnaire screen to save this Initiation with the scheduled date.

OK **Cancel**

You will find the questionnaire on the questionnaires tab for later completion.

Questionnaires (selected tab)

QuestionnaireType	Entry date	Summary
Rivaroxaban Follow Up	06/06/2013 11:00	
Rivaroxaban Candidate	30/05/2013 11:15	GFR 68 mL/min - Dose: 20 mg once daily

[\(back to Complete a Follow-up page\)](#)

[\(back to Detailed Workflow page\)](#)

[\(back to Starting a Non-VKA Treatment Plan page\)](#)

6.3.2 Complete a Follow-up (Non-VKA)

The Rivaroxaban **Follow-up Questionnaire** will display details from the patient's treatment plan as shown. It is not possible to schedule a Follow-up Questionnaire unless an active Rivaroxaban treatment plan has been set.

Rivaroxaban Follow Up

Patient Name: Horace Balloon Date of completion: 31/05/2013 16:00
 31/05/2013 at: 16 : 00
 24hr format

NB Please check this appointment is made in your clinic diary or hospital administration system.

NHS Number: to be completed at: NOAC Clinic

Unit No: 12045204 Status: Scheduled

Therapeutic Indication: Atrial fibrillation nonvalvular

NB Remember to schedule a follow-up questionnaire for this patient 6 months after the Rivaroxaban treatment plan is activated

The questions cover

- compliance issues ([patient questions](#) and reasons for [compliance issues](#))
- [adverse events](#)
- [renal function](#) including a calculator for Cockcroft-Gault estimate of CrCl
- records for other tests
- [Contraindicated](#) or [Interacting](#) drugs including [other anticoagulants or platelet inhibitors](#)
- [Contraindicated conditions](#) and [Haemorrhagic Risks](#)
- records for [CHADS2 and HASBLED](#) scores
- notes for planned procedures or other comments

Once you have answered all questions, click on 'Mark as complete' and then [schedule another Follow Up](#) for your patient. See [details of the Follow-up Questionnaire](#).

OK Cancel Save

If you cannot answer some questions, simply click OK or Save and come back later to complete the answers.

Mark as complete

On marking the answers as complete you are confirming that DAWN can store this record, display a summary on the questionnaires tab and check details against the treatment plan.

If you've added some details in error, Cancel your changes using 'Cancel' or the rewind button at the top of the screen -



If you need to delete a questionnaire completely, look for the bin symbol on the questionnaires tab and save before confirming you wish to delete this record-

QuestionnaireType	Entry date	Summary
Rivaroxaban Follow Up	06/06/2013 11:00	
Rivaroxaban Follow Up	06/06/2013	
Rivaroxaban Candidate	30/05/2013 11:15	GFR 68 mL/min - Dose: 20 mg once da

If you need to add more information or adjust the Follow-up Questionnaire which is already completed -

1. locate the completed questionnaire on the Questionnaires tab

2. select Unlock to edit

Unlock to edit

3. save your changes

NB - unlocking a previous questionnaire to edit it may cause the details to be updated with subsequent changes to the patient details. For example, if the patient was previously on an interacting drug which was later removed from your DAWN database, the drug would still be stored in the old completed questionnaire. On unlocking the old questionnaire, the record for this drug may no longer be available.

[\(back to Detailed Workflow page\)](#)

6.3.2.1 Patient questions

It may be useful to record patient feedback on the following questions in the **'Rivaroxaban Follow Up Questionnaire'**

I have taken the correct dose every day	<input type="radio"/> No <input type="radio"/> Yes
I might have taken too many capsules / tablets	<input type="radio"/> No <input type="radio"/> Yes
I might have missed one or more doses	<input type="radio"/> No <input type="radio"/> Yes
Notes:	<input type="text"/>
I have started a new medication recently	<input type="radio"/> No <input type="radio"/> Yes

[\(back to Complete a Follow-up page\)](#)

6.3.2.2 Reasons for compliance problems

Please tick any of the compliance problems which apply to your patient. These problems may be important in dosing decisions for Rivaroxaban.

Reasons for compliance problems:	<input type="checkbox"/> Dementia <input type="checkbox"/> Fear of side-effects <input type="checkbox"/> Gastrointestinal Bleed <input type="checkbox"/> Lack of information <input type="checkbox"/> Lives alone <input type="checkbox"/> Multiple medications <input type="checkbox"/> Prescriptions from several doctors
----------------------------------	---

The list of compliance problems may be edited / added to by your system administrator using the General Look Up Category Table called 'ComplianceReason'.

[\(back to Complete a Follow-up page\)](#)

6.3.2.3 Adverse events reported

Please tick any of the adverse events which apply to your patient. These events are identified in prescribing guidelines as significant events for consideration in dosing decisions for Rivaroxaban.

Has the patient reported any adverse event (potentially due to current anticoagulant)?:	<input type="checkbox"/> Anaemia <input type="checkbox"/> Bruising <input type="checkbox"/> Change in colour of stools <input type="checkbox"/> Epistaxis <input type="checkbox"/> Haematoma <input type="checkbox"/> Vomiting blood
---	---

The list of adverse events may be edited / added to by your system administrator using the General Look

Up Category Table called 'Adverse Bleed Events'.

NB - any events identified on the Follow-up Questionnaire will **NOT** automatically display on the Events tab of your patient screen.

Please click on 'Events' tab to fully record events on the patient screen.

[\(back to Complete a Follow-up page\)](#)

6.3.2.4 Renal function

Estimates of renal function may be recorded in several ways on the Follow Up Questionnaire and these will be used to modify the suggested dose where renal function is severely impaired or not recorded.

- measured creatinine clearance (laboratory estimation)
- Estimated Glomerular Filtration Rate (eGFR)
- serum creatinine
- Cockcroft-Gault estimation of creatinine clearance
- other measures may be recorded in the notes box

DAWN provides a calculator for estimating renal function from serum creatinine and body weight. Enter these 2 values and click on the '**Calculate Cockcroft-Gault CrCL**'.

Measured Creatinine Clearance: <input type="text"/> mL/min	
Cockcroft-Gault estimate of CrCl: <small>Cockcroft D, Gault MD. Nephron, 16:31-41, 1976</small>	$\frac{1.23 \times (140 - \text{age years}) \times \text{weight kg} \times (x 0.85 \text{ if female})}{\text{serum creatinine } \mu\text{mol/L}}$
Serum Creatinine: <input type="text" value="188"/> $\mu\text{mol/L}$ High	
Body Weight: <input type="text" value="69"/> kg	
Gender: Female	
Age (at due date): 70	
<input type="button" value="Calculate Cockcroft-Gault CrCl"/>	27 mL/min <div style="color: red; font-weight: bold;">✗ Contraindicated: severe renal impairment</div> <p style="font-size: small; color: blue;">Please be aware of the limitations of estimates of renal function in relation to muscle mass, race and diet.</p>

Note - if you have a laboratory estimation which is less than a numeric value (like <30), please enter the number (like 30) in the Measured Creatinine Clearance or Serum Creatinine boxes. Similarly for results which are reported as greater than a value (like > 220), please enter the numeric value (like 220).

The limits used for renal impairment are set as follows in DAWN -

- Severe renal failure is defined as measured creatinine clearance or estimated glomerular filtration rate or Cockcroft-Gault estimation of CrCl less than 15mL/min.
- If more than one measure of renal function is entered, measured creatinine clearance is considered in preference to estimated glomerular function rate in preference to Cockcroft-Gault estimation of creatinine clearance
- Moderate to severe renal impairment is defined as measured creatinine clearance = 15-50 L/min or estimated glomerular filtration rate = 15-60 mL/min or Cockcroft-Gault estimation of CrCl = 15-50 /min

Note – 15-50 is taken to mean greater than equal to 15 and less than 50.

[\(back to Complete a Follow-up page\)](#)

6.3.2.5 Contraindicated drugs

Some concomitant drugs may be known to be contraindicated for the chosen anticoagulant as published in the prescribing guidelines. Please tick any drugs if your patient is currently prescribed this drug.

<input type="checkbox"/>	OTHER ANTICOAGULANT (HEPARIN, DABIGATRAN,...)
<input type="checkbox"/>	DRONEDARONE
<input type="checkbox"/>	ITRACONAZOLE
<input type="checkbox"/>	KETOCONAZOLE
<input type="checkbox"/>	POSACONAZOLE
<input type="checkbox"/>	RITONAVIR
<input type="checkbox"/>	SINTHROME
<input type="checkbox"/>	WARFARIN

The list of drugs displayed are defined in the Look Up Tables on your DAWN database and additional drugs may be added to this list as required. Please contact your system administrator to add new drug settings to the 'Interacting Drugs' table.

[\(back to Complete a Follow-up page\)](#)

6.3.2.6 Interacting drugs

Some interacting drugs may be known to be increase the haemorrhagic risk if used along with the chosen anticoagulant. See relevant published prescribing guidelines. Please tick any drugs if your patient is currently prescribed this drug.

- ☐ ASPIRIN
- ☐ CLARITHROMYCIN
- ☐ OTHER NSAIDs
- ☐ TELITHROMICIN
- ☐ VORICONAZOLE

The list of drugs displayed and the advice displayed on screen are defined in the Look Up Tables on your DAWN AC database. Updates to the advice or additional drugs may be added to this list as required. Please contact your system administrator to add new drug settings to the 'Interacting Drugs' table.

[\(back to Complete a Follow-up page\)](#)

6.3.2.7 Other anticoagulant or platelet inhibitor

It is important to record any other anticoagulant or platelet inhibitor prescribed along with Rivaroxaban even if this for a short period.

<p>Other anticoagulant or platelet inhibitor* :</p> <p>Care is to be taken if patients are treated concomitantly with medicinal products affecting haemostasis</p> <p>If (other), please give details:</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Abciximab <input type="checkbox"/> Eptifibatide <input type="checkbox"/> Prasugrel <input type="checkbox"/> Ticagrelor <input type="checkbox"/> (Other) <div style="border: 1px solid #ccc; height: 20px; width: 350px; margin-top: 10px;"></div>
--	--

The list of drugs displayed may be added to or edited in the General Lookup Category for 'Anticoagulant or Platelet Inhibitors' - please contact your system administrator to arrange changes to the displayed options.

[\(back to Complete a Follow-up page\)](#)

6.3.2.8 Other contraindications

Please tick any of the other contraindications which apply to your patient. These risks are identified in prescribing guidelines as contraindications for dosing with Rivaroxaban.

<p>Other contraindications* :</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Clinically significant active bleeding <input type="checkbox"/> Creatinine clearance <15ml/min <input type="checkbox"/> Hepatic impairment or liver disease expected to have any impact on survival <input type="checkbox"/> Hypersensitivity to tablet excipients or galactose intolerance <input type="checkbox"/> Paediatric Patient <input type="checkbox"/> Pregnancy and breastfeeding <input type="checkbox"/> Prosthetic Heart Valve
-----------------------------------	--

The list of contraindications displayed on the Follow-up Questionnaire may be edited / added to by your system administrator using the Look Up Tables called Risks and Specific Risks.

NB - any risks identified on the Initiation Questionnaire will **NOT** automatically display at the top-left of your patient screen. You may wish to highlight these manually on the patient screen either by [adding Risks for a new patient](#) or clicking on the 'Risks' button to add risks for an existing patient screen.

The screenshot shows a patient screen with the following fields and buttons:

- Risk class:** Tests ordered
- Pref. clinic:** NOAC Clinic (Big Hospital)
- Phone:** 015395 63091 - home
- Age:** 72
- Diagnosis:** Atrial fibrillation nonvalvular ...
- Target Range:** Non-VKA
- Start date:** 21/12/2012 -
- Anticoagulant:** Rivaroxaban 20 mg Once Daily
- Treatment Plan:** 1 of 1 New
- Risks:** (This button is circled in red)

[\(back to Complete a Follow-up page\)](#)

6.3.2.9 Haemorrhagic risks

Please tick any of the risks which apply to your patient. These risks are identified in prescribing guidelines as significant risks for consideration in dosing decisions for Rivaroxaban.

The screenshot shows the 'Haemorrhagic Risks*' section with the following list of risks and checkboxes:

- ☐ Active ulcerative gastrointestinal disease
- ☐ Bronchiectasis or history of pulmonary bleeding.
- ☐ Congenital or acquired coagulation disorder
- ☐ Intrapinal or intracerebral vascular abnormalities
- ☐ Recent brain, spinal or ophthalmological surgery
- ☐ Recent intracranial or intracerebral haemorrhage
- ☐ Uncontrolled severe arterial hypertension
- ☐ Vascular retinopathy

The list of haemorrhagic risks may be edited / added to by your system administrator using the Look Up Tables called Risks and Specific Risks.

NB - any risks identified on the Follow-up Questionnaire will **NOT** automatically display at the top-left of your patient screen - see [adding Risks for a new patient](#) or click on 'Risks' button to add risks on the patient screen.

Risk class	Tests ordered
Pref. clinic	NOAC Clinic (Big Hospital)
Phone	015395 63091 - home
Age	72
Diagnosis	Atrial fibrillation nonvalvular ...
Target Range	Non-VKA
Start date	21/12/2012 -
Anticoagulant	Rivaroxaban 20 mg Once Daily
Treatment Plan	◀ 1 ▶ of 1 New
Risks	

[\(back to Complete a Follow-up page\)](#)

6.3.2.10 CHADS and HASBLED scores

CHADS2 and HASBLED scores may be optionally recorded from the dropdown menus on your questionnaire.

CHADS₂ score?

C	Congestive heart failure	1
H	Hypertension (or treated hypertension)	1
A	Age older than 75 years	1
D	Diabetes mellitus	1
S	Previous stroke or transient ischaemic attack	2

(None selected)

0
1
2
3
4
5
6

HASBLED score?

(None selected)

(None selected)

0: Risk was 0.9% in one study
1: Risk was 3.4% in one study
2: Risk was 4.1% in one study
3: Risk was 5.8% in one study
4: Risk was 8.9% in one study
5: Risk was 9.1% in one study
6: Risk not known - too little data
7: Risk not known - too little data
8: Risk not known - too little data
9: Risk not known - too little data

The dropdown options are provided from the settings in your DAWN Normal Tables, General Lookup

Category (CHADS2 Score and HASBLED). You may wish to request that your system manager updates the options available.

[\(back to Complete a Follow-up page\)](#)

[\(back to Settings for General Lookup Category page\)](#)

6.4 FAQ - non-VKA records on DAWN

Q Problems activating a treatment plan

A Check the following -

1. Is the patient is marked 'Active' on the Personal tab?	You may need to click on 'Activate' or Re-activate'
2. Is an Initiation Questionnaire is showing with a dose on the Questionnaires tab?	You may need to complete a questionnaire which is still marked as 'Scheduled'
3. Has the Initiation Questionnaire has different details?	Check that the same diagnosis and dose have been chosen in both the treatment plan and Initiation Questionnaire
4. Is the Initiation Questionnaire marked as 'contraindicated'?	Check that the therapy is suitable for the age / diagnosis / other medications - if it is your DAWN settings may need to be updated by your system manager - contact support@4s-DAWN.com for assistance

Q Why is my patient not on the non-VKA list view?

A Check the following -

1. Has the patient got a DAWN treatment plan for the non-VKA agent?	See adding a new treatment plan
2. Have you chosen a date or clinic filter on the left of the non-VKA list view which excludes this patient?	Adjust the filters on the left of the list view to see all patients with a non-VKA treatment plan

Q Why do I get 'Contraindicated' warnings?

A Contraindications may be for inappropriate concurrent medications (see [interacting drugs](#)) or risks (see [haemorrhagic risks](#)) or [age / renal function](#).


Q The Rivaroxaban dose I need to use isn't available on the DAWN screen?

A Your DAWN settings may need to be updated by your system manager - contact support@4s-DAWN.com for assistance

Q Where is the INR -warfarin history for my patient now?

A View previous treatment plans using the black arrow on the patient screen and you'll see the History panel for any VKA episode of treatment.

Blue, Brian - 04/04/1946 - 342523555 - 4

Risk class	High	
Pref. clinic	NOAC Clinic (Big Hospital)	
Phone	015395 63091 - home	
Age	67	
Diagnosis	Recurrent DVT ...	
Target Range	Non-VKA	
Start date	03/01/2013 - Indefinite	
Anticoagulant	Rivaroxaban 20 mg Once Daily	
Treatment Plan	◀ 2 ▶ of 2 active	
Risks	poor compliance	

[\(back to Detailed Workflow page\)](#)

Part

VII

7 Changing Anticoagulant

You may wish to record changes in your patient's anticoagulation on DAWN when

[Changing between different VKA's](#) (like Warfarin and phenindione)

[Changing type of non-VKA](#) (like Rivaroxaban)

[Changing between VKA and non-VKA](#) (like Warfarin to Rivaroxaban or *vice versa*)

[Bridging VKA patients with LMWH](#)

[\(back to Detailed Workflow page\)](#)

7.1 Changing between different VKA's

In DAWN, [stop the treatment plan](#) and [start a new treatment plan](#) for a change in the patient's anticoagulant.

Treatment plans for Stephenson Hedley (01/07/1932)

Disease area	PrimaryDiagnosis	Start date	Duration in weeks	Status
Anticoagulation	- ATRIAL FIBRILLATION (11/04/2008)	10/03/2008		stopped

Disease area: Anticoagulation
PrimaryDiagnosis: - ATRIAL FIBRILLATION (11/04)
Start date: 10/03/2008
Duration type: Long Term
Preferred clinic: Telephone
Preferred time: From
CessationReason: Elevated stroke risk
Status: stopped

ACTherapy: Maintenance
Target range: 2.0 - 3.0 (2.5 Target)
Warfarin 2½mg Strength: (None selected)
Sun Mon Tue Wed Thu Fri: 1 1½ 1 1½ 1 1½ 1
Pills 2.5 mg:
MaxPercentDoseChange: 5

First STOP any existing treatment plan

Note - DAWN will prevent a change of anticoagulant within an active treatment plan.

[\(back to Changing Anticoagulant page\)](#)

7.2 Changing type of non-VKA

It is strongly recommended that you [stop the treatment plan](#) and [start a new treatment plan](#) for any significant change in the patient's anticoagulation.

AC: Anticoagulation	
New	
Start date	07/09/2012
Duration	
Target range	Non-VKA
Anticoagulant	Rivaroxaban 10mg Once Daily
Referring GP	-
Consultant	-
stopped	
Start date	03/04/2012
Duration	Treatment stopped - Stopped at: 07/09/2012 11:50
Target range	Non-VKA
Anticoagulant	Dabigatran 110 mg twice daily
Referring GP	-
Consultant	-
Cessation Reason	Patient decision

[\(back to Changing Anticoagulant page\)](#)

7.3 Changing between VKA and non-VKA

In DAWN, [stop the treatment plan](#) and [start a new treatment plan](#) for a change in the patient's anticoagulant.

Treatment plans for Stephenson Hedley (01/07/1932)

Disease area	PrimaryDiagnosis	Start date	Duration in weeks	Status
Anticoagulation	ATRIAL FIBRILLATION (11/04/2008)	10/03/2008		stopped

Disease area	Anticoagulation	ACTherapy	<input type="radio"/> Induction <input checked="" type="radio"/> Maintenance <input type="radio"/> Manual/Bridging
PrimaryDiagnosis	- ATRIAL FIBRILLATION (11/04)	Target range	2.0 - 3.0 (2.5 Target)
Start date	10/03/2008	First seen date	
Duration type	Long Term	Treatment stopped	Warfarin 21/mg Strength
Preferred clinic	Telephone M		(None selected)
Preferred time	From		Sun Mon Tue Wed Thu Fri
CessationReason	Elevated stroke risk		1 1½ 1 1½ 1 1½ 1
Status	stopped	ReActivate	Pills 2.5 mg
			MaxPercentDoseChange
			5

First STOP any existing treatment plan

Note - DAWN will prevent a change of anticoagulant within an active treatment plan.

[\(back to Changing Anticoagulant page\)](#)

7.4 Bridging VKA Anticoagulation with LMWH

For customers who use the DAWN Anticoagulation system, LMWH (heparin) doses may be in DAWN within a VKA treatment plan using customised dosing options.

Dosing Contacts Letters Drugs Events Procedures

INR: 2.3 **InRange** ✓ Date: 06/09/2012 ✓

Warfarin	Sun	Mon	Tue	Wed	Thu	Fri
mg	1	1				1
Total mg	1	1	0	0	0	1

Clexane	Sun	Mon	Tue	Wed	Thu	Fri
08:00 AM 30Mg			✓	✓	✓	
08:00 PM 30Mg			✓	✓	✓	

⏪ Dose decreased by 92% Dose: 0.50 d ⚠

Status: **Tested** Next: 14/09/2012

Accept dose

Please see section on '**Setting up LMWH and Pentasaccharide Agents**'

[\(back to Changing Anticoagulant page\)](#)

Part



8 Using the system

DAWN is a web-based software package installed within your network. You should be able to access the system using Internet Explorer from any PC on your site and your local system administrator will set a password for you.

- See how to [log in](#) (log in with [active directory](#))
- [How to navigate around DAWN](#)
- How to [get started](#)
- see an [overview of the workflows in DAWN](#)

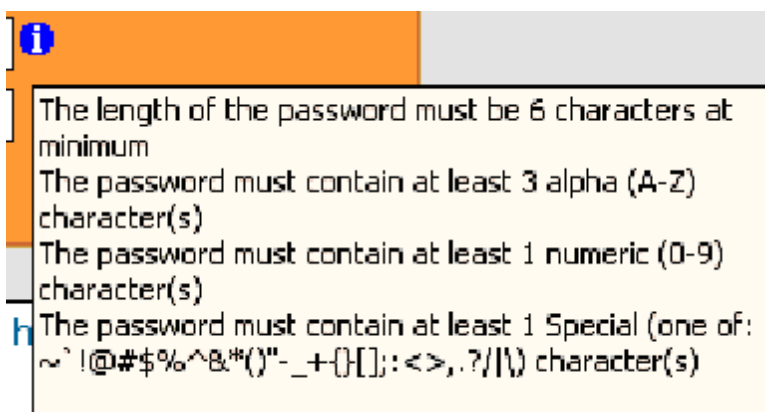
8.1 Logging Into DAWN

When opening up DAWN, you will need to log in with your user account.

Take care to type your user name and password correctly using the correct combination of capital and small letters, ensuring that the Caps Lock is on and off at the correct times. Take care not to confuse the letter O and the number zero or the letter I and the number one:



If you would like to change your existing password, a new password can be created from this screen. Before doing this, hover your cursor over the blue 'i' icon to the right of the new password field. This gives the criteria that the password must meet:



Although these settings can be altered within the system, the default requirements are as follows:

- The length of the password must be at least 6 characters long
- The password must contain at least 3 alpha characters, eg, A, B, C, a, b, c etc
- The password must contain at least 1 numeric character, eg, 1, 2, 3, etc
- The password must contain at least 1 special character, eg, *, ", \$, %, etc

For example, a password such as Tracy1! would meet these criteria.

Enter your new chosen password into the New Password and Confirm boxes, before clicking on the Login button:

If your password change has been successful, the system should log you into DAWN.

If you are unsuccessful, a message should appear telling you why, ie, 'user name incorrect', 'password incorrect'.

You are allowed up to three attempts at logging into DAWN before a screen appears saying 'Login Denied! Please contact your system administrator'. If this occurs, you can close down all internet screens and try bringing up DAWN again to log in.

If you then unsuccessfully try to log into DAWN another two times (which totals 5 attempts altogether), then your user account will become locked and another user will need to log into DAWN to unlock it.

If all users are unable to log into the DAWN system, there may be an issue with the DAWN system itself. Please contact your IT department if this occurs.

8.2 Logging In - Active Directory Support

DAWN supports Active Directory Login. This means users who have a network login can store this ID in DAWN. When they access the application, if DAWN recognises their network ID, it automatically logs them in without prompting them to type a DAWN specific user ID and password.

To enable Active Directory Support

To enable Active Directory Support you need to perform the following steps:

1. Enable Active Directory support in DAWN
2. Update each user's Healthcare Professional Account record with their Network ID.
3. Disable anonymous access to the DAWN web site in Internet Information Services to ensure that users connect to the web server with their network ID and not with the default Internet Guest Account.

Enabling Active Directory Support in DAWN

1. Press F5 to display the System Menu then choose Management/System to display the system options.
2. Click on *SystemSetting*, type "Domain" into the *Search for Name* field and click the Search button. The *DefaultNetworkDomain* system setting is displayed.
3. Enter the name of your active directory domain in the *Value* field.

DAWN AC version 7.0

License_MaxActivePatient

Frontpage

Normal Tables

HealthAuthority

Organisation

Ward

HCPProfessional

Clinic

PatientGroup

LoginLog

PrintStation

Clinic-diary

Lookup tables

Reports

Management

MailMerge

Clinic View settings

MessageManagement

Reports

Parameter

Report

Audit & security

System

Instant SQL

Instant Script

SystemSetting

International settings

CodedComment

Search for: Name: defaultnetworkdomain Value: Search

Name	Value	Description
DefaultNetworkDomain	4sdev.com	The default domain for the network, used for the automatic identification of users

4. Enter "ActiveDirectory" in the *Search for Name* field and press the Search Button. The *SupportActiveDirectory* system setting is displayed.

Name	Value
SupportActiveDirectory	1

5. Change the *Value* to 1 (to disable Active Directory support change the *Value* to 0).

Updating the Healthcare Professionals' Account Records

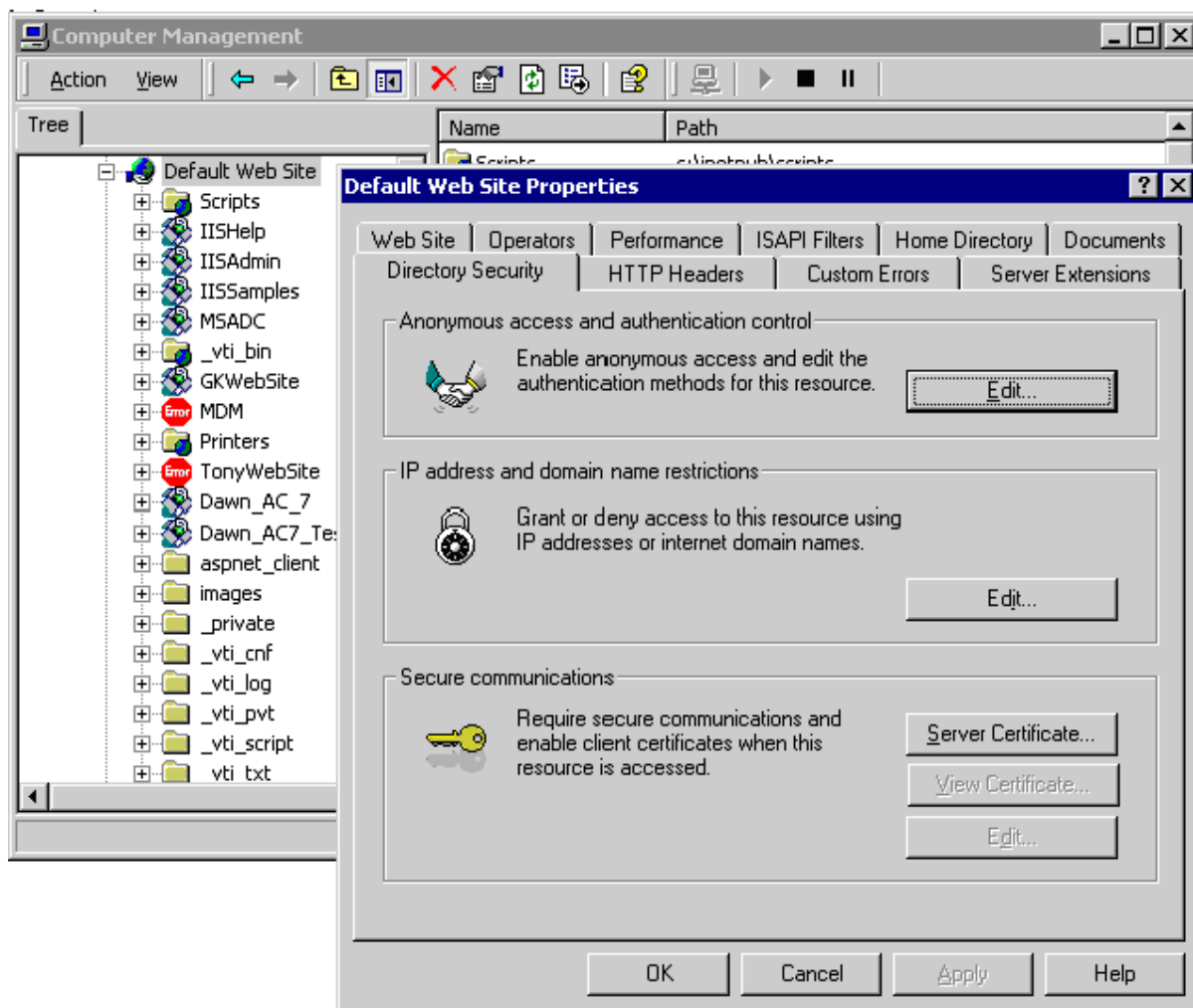
1. Choose Normal Tables/HCPProfessional from the System Menu to display the list of Healthcare Professionals.
2. Choose the Edit form icon to the left of the appropriate Healthcare Professional to display their full details.
3. Choose the Account tab and enter the user's Active Directory Network User ID in the *NetworkName* field.

The screenshot shows the 'HCPProfessional' form with the 'Account info' tab selected. The 'NetworkName' field at the bottom is highlighted with a red circle. Other fields include Organisation (Big Hospital), HCPProfessionalType (IT), LastName (Support), FirstName (45), Initials (45), InUse (checked), User (Dawn), PasswordExpirationDate (29/05/2050), Failed login count (0), Failed login count (total) (24), Locked (unchecked), Last login date (29/06/2009 1), Total number of logins (193), and UserProfile (Top Grade).

Disabling Anonymous Access to the DAWN website

4. Right click on *My Computer* and choose *Manage* from the pop up context menu to display the Computer Management Console.
5. Expand the *Services and Applications* branch of the menu and click on *Internet Information Services*.
6. Expand the *Web Sites* folder, right click on the Web Site which hosts DAWN and choose *Properties* from the pop up context menu. The web site properties are displayed.
7. Choose the *Directory Security* page and click the *Edit* button in the *Anonymous Access and*

Authentication section



5. Deselect the *Anonymous Access* option and ensure the *Integrated Windows Authentication* option is selected.

8.3 Workflows in DAWN - an overview

Users – Daily/ Weekly Routines	
Patients for follow-up today	
Select list views for	
Rivaroxaban	
Patients starting on non-VKA	
Use Patient search to select or add the patient to DAWN	
Workflow for a Patient	

Non-Attendees	
Select list view for Rivaroxaban and the filter for Overdue	
Incomplete records	
Select list view for Rivaroxaban and the filter for No next review date	
Listings Reports	
Select Reports from the front menu as required	

[\(back to Detailed Workflow page\)](#)

8.4 How To Navigate Around DAWN

HOW TO NAVIGATE AROUND THE DAWN SCREENS

There are several ways of moving through the different screens within DAWN.



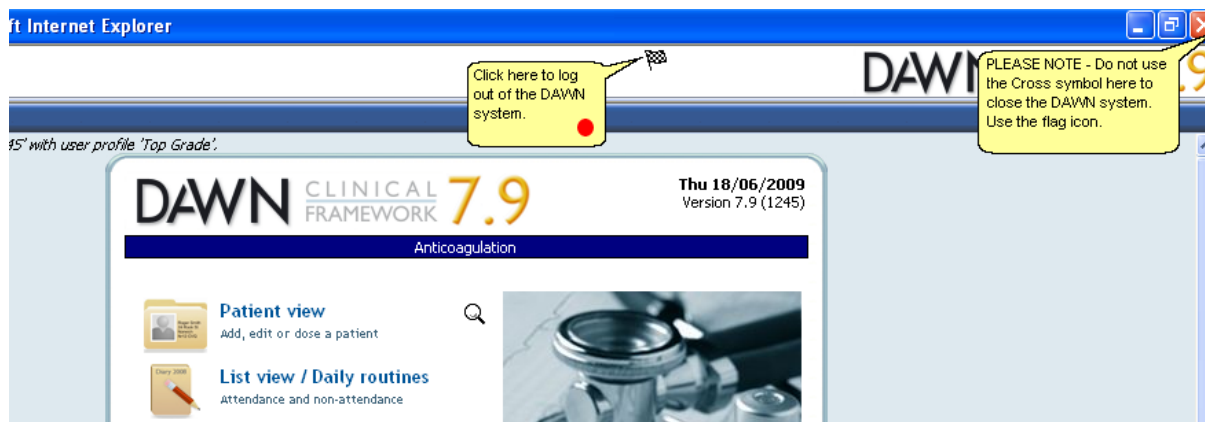
close and save the current screen

add a new record such as a note or a diagnosis

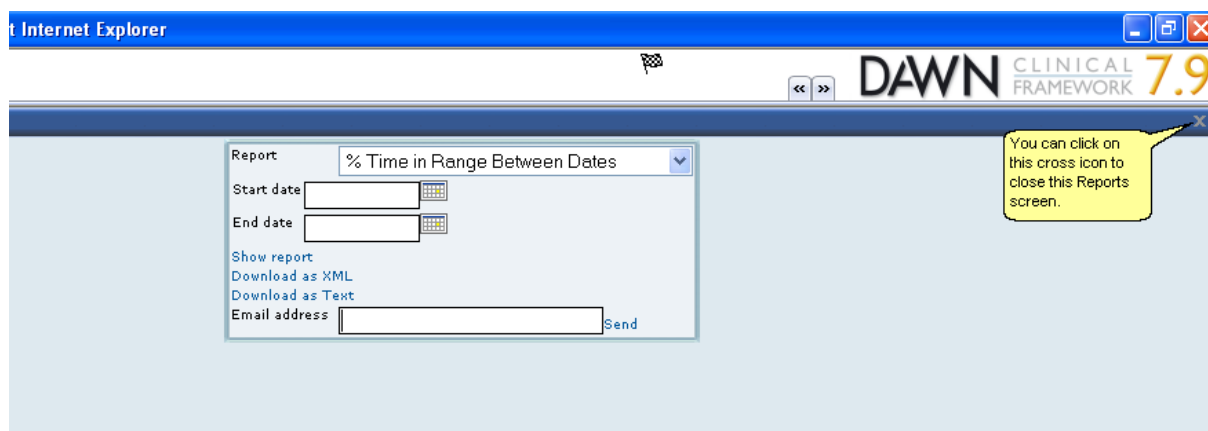
see details

to delete – click the bin / trash can and save

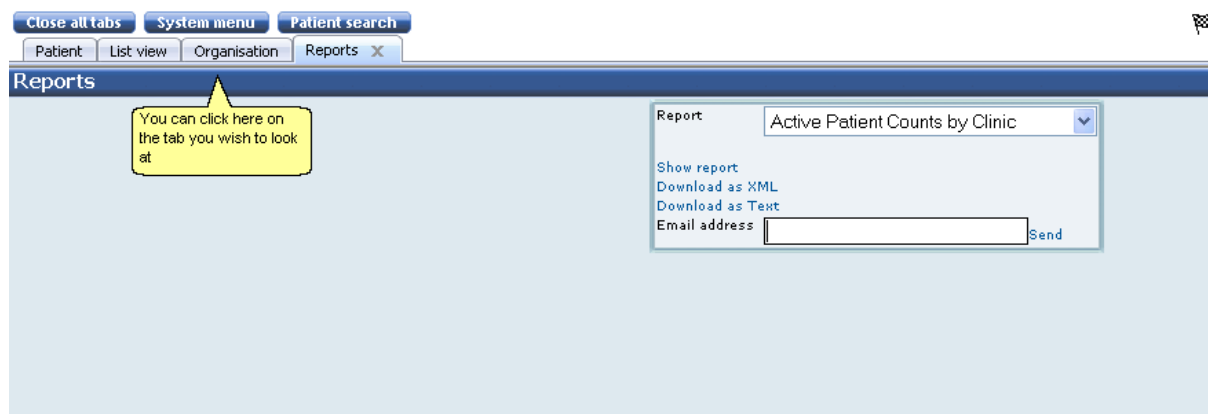
To log out of the system, you can use the Flag icon:



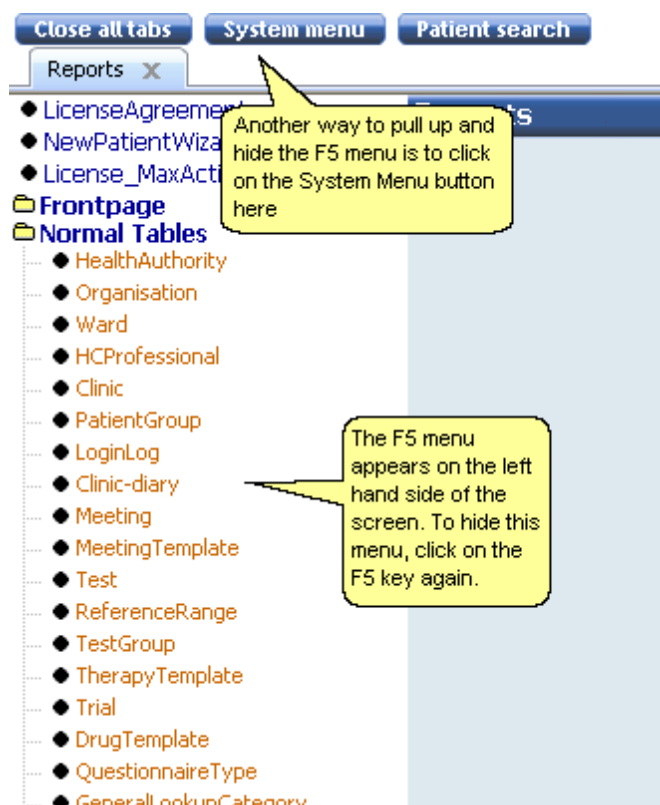
To close individual screens within DAWN, you can use the black cross on that page:



To view a page you have already opened previously, you can choose the screen you require from the tabs list at the left of the screen:



To bring up an additional menu on the DAWN front screen, choose the F5 key on your keyboard, or click on the Sys Menu button at the top left of the screen:



To close all open screens and go back to the original DAWN front screen from anywhere within the system, click on the Close All Tabs button at the top left of the screen.

To search for a patient from anywhere within the system, click on the Search button at the top left of the screen.

8.4.1 Login Confirmation Screen

The screenshot displays the DAWN system interface. At the top right, there is a small flag icon. The main content area features a search form with the following fields: Last name, First name, Date of birth, and MRN. A magnifying glass icon is positioned to the left of these fields. Below the fields is a 'Search' button. Underneath the search form is a table with the following data:

Last name	First name	Date of birth	MRN	Status
Stevenson	Lisa	01/01/1922	54657565	Inactive
Ferguson	Stacey	05/06/1993	2345345345	Active
Pearson	Paul	01/01/1995	213344	Active
Fielding	Nina	23/05/1945	6785674	Active
Stellar	Steven	01/01/1939	457456	Active
Pye	Delia	11/01/1943	2344	Active
yetanother	test	01/01/1966	464646	Active
Induction	Patient		375	Active

Overlaid on the bottom of the screenshot is a Microsoft Internet Explorer dialog box titled 'Do you want to log out?'. The dialog box has a question mark icon and two buttons: 'OK' and 'Cancel'. A yellow callout box points to the 'OK' button with the text 'Click here to log out.' Another yellow callout box points to the dialog box with the text 'A box appears asking you to confirm your choice to log out of DAWN.'

8.4.1.1 DAWN Login Screen

Username

Password

If you want to change your password, please also fill the following two fields.

New password

Re-type new password

©1997 - 2009 4S Information Systems Ltd [LOGIN](#)

You are taken back to the login screen of DAWN. Click here to return to the navigation page.

By logging on to this system you have been deemed to accept the following warnings and conditions of use:

- Inadequate Checking of Dose and Next Test Date
- Check that all therapy instructions are appropriate before instructing a patient.
- Interruptions to the operations of the software, e.g. Power failure, switching of, can lead to data corruption. This could lead to severe injury and death. Following any such interruption to operation, increase checking vigilance.
- Read the Safety Section in the User Manual.
- Ensure backup of your database using a multiple copy schedule.
- By using this software the user is bound by the terms of the Software Licence and Maintenance agreement and Customer Obligations document.

8.5 DAWN Front Page

The icons running down the page will give you access to each part of the DAWN system

The front page displays useful patient counts such as the number of active patients and the number of patients who have missed a test. These figures will differ depending on which application area you are using

Current location for printing:

Category	Induction	Maintenance	Explanation
No. of Active Patients	1	6	Patients on Treatment Now
Missed Test	0	0	Needs rescheduling
No next test date		2	Needs scheduling
No INR today	0	0	Awaiting result / yet to attend
No dose today	0	0	Needs Dose Instruction

This section displays the number of letters, emails or faxes that are pending, awaiting acknowledgement or undeliverable

Messages	Explanation	Interface
Pending Messages	Waiting to be sent	0
Awaiting Acknowledgement	Awaiting	0
Undeliverable Messages	Failed to	0

This displays whether your outbound interface is running (if you have an outbound interface)

Outbound Interface Status
Stopped

The interface status menu displays how many anticoagulation results are in the hold monitor, how many results from other application areas are in the hold monitor, and how many results are in the test result monitor (see the 'Viewing unmatched interface results' section in this e-book)

Inbound Interface Status	
AC Messages On Hold	0
Messages On Hold	0
Test Result Errors	0

8.6 List Views - What are They?

List Views are lists of patient records selected and ordered on predefined criteria.

Use List Views to quickly access records for

- patients due for review today
- patients with missed reviews
- reminders outstanding, ...

Up to 10 List Views can be configured in your DAWN system.

The user can apply filters such as date range or patient status to refine the list of records viewed. Bulk messages can be sent for patients identified on a List View.

If you edit/amend list views within the system, remember to check all changes thoroughly. This can be done using a 'dummy' patient within the system.

Click [HERE](#) to learn how to use list views.

8.7 Personal Settings

DAWN Personal settings are user specific and can be used to determine which tabs and screens the user will and will not view within the system.

with user profile 'Top Grade'.



DAWN CLINICAL FRAMEWORK 7.9 Tue 23/06/2009
Version 7.9 (1245)

Anticoagulation

Patient view
Add, edit or dose a patient

List view / Daily routines
Attendance and non-attendance

Diary
Consult the diary

Message center
Manage messages and pass messages by phone

Reports
Custom reports

Settings
Modify your personal settings

Click here to configure the user's personal settings

Current location for printing: Select a location

Category	Induction	Maintenance	Explanation
No. of Active Patients	1	6	Patients on Treatment Now
Missed Test	0	0	Needs rescheduling
No next test date		2	Needs scheduling

8.7.1 Personal Settings Form

Personal settings

HiddenPatientTabSheets

- ☐ Letters
- ☐ Drugs
- ☐ Events
- ☐ Procedures
- ☐ Reviews
- ☐ Reminders
- ☐ Groups
- ☐ Documents
- ☐ Owners
- ☐ Audit
- ☐ Graph
- ☐ History
- ☐ NextOfKin
- ☐ Clinical
- ☐ TreatmentPlans
- ☐ Questionnaires
- ☐ PatientResults
- ☐ InboundMessages

InitialPatientTabSheet

InitialVisitHistoryDisplay

SuppressSentMessagesNotifications

SuppressTreatmentWarnings

LocalSettings_PatientHeight

LocalSettings_PatientWeight

EnableCustomizedWeekPatterns

Save

Callouts:

- You can check the boxes here for tabs that you do not wish to see on the main patient screen. These may be tabs that are not relevant to your workflow.
- Please note - do not check the SuppressSentMessagesNotifications box as incorrect or missing messages may not be noticed
- You can use the drop down menu here to decide which tab in the lower right section of the main patient screen will be displayed by default. The options are personal, history or graph.
- For the clinical framework patients, the scroll down menu gives options for seeing all results or just planned results
- "Show interventions only" = see planned appointments with latest results
- "Show both..." = to see all results received by Dawn
- The local settings for height and weight specify whether the height and weight are recorded in metric measurements or not
- Click here to save these settings and return to the Dawn front screen

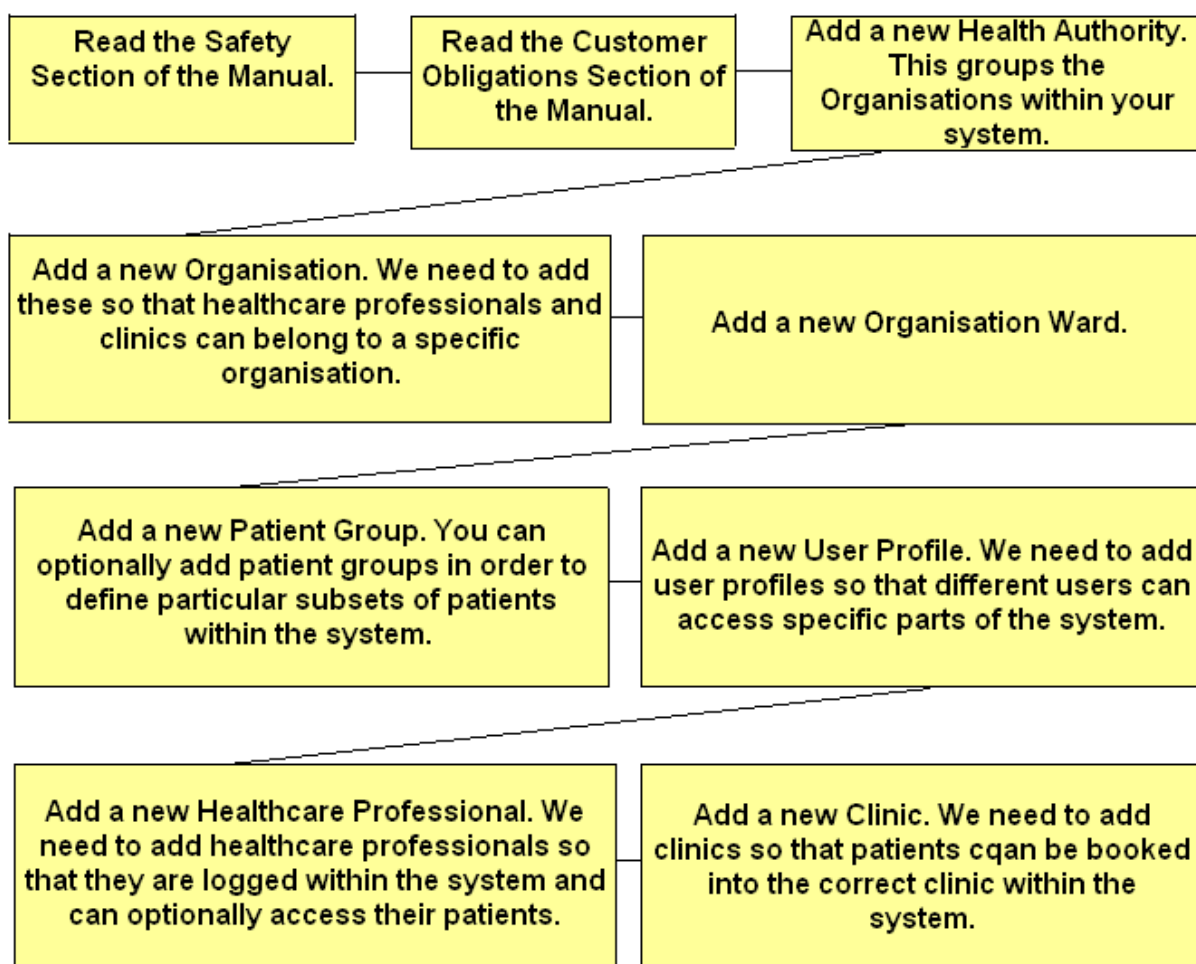
8.8 Getting Started Workflow

DAWN

WORKING THROUGH THE SYSTEM

Before starting to dose patients and use the DAWN system in a live situation, we need to set up several sections first. This configures the DAWN system to your specific needs, so that patients can be monitored quickly and effectively, and all the information logged against them is correct, *ie* the patient is booked into the correct clinic at the correct time, and has the correct referring GP and consultant details.

In order to initially start using the system, you can go through some of these steps in order.



Once the above settings are all in place, follow the
Workflow for a Non-VKA Patient

8.9 Printing from DAWN

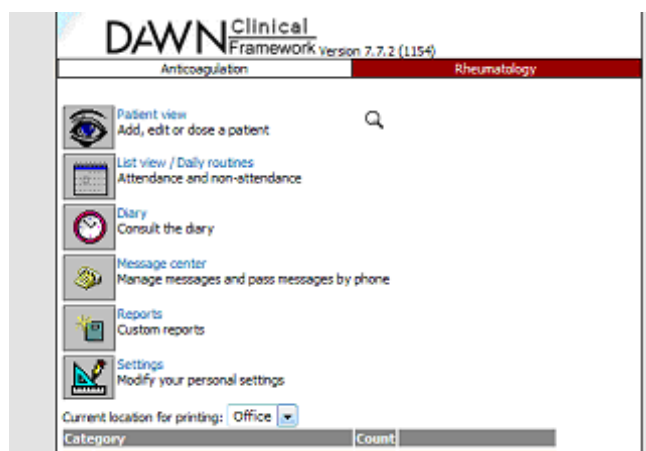
To send a letter to a patient (or colleague), select the patient record and click on the Letters tab at the

top. The following dropdown menus show the letter templates loaded in your system. Contact your system administrator to amend or add new templates.

Select a Direct Print (local printer) – uses your local printers (and any network printers you can see) from your PC

Select a custom message to send – uses available network printers via DAWNMailer and can send messages by fax / e-mail / phone

If you use DAWN Mailer, you can choose a specific location for printing on the front screen. This means that if you are working in the administration office you can ensure your letters print on the administration office printer, whereas if you are in a clinic room you can ensure your letters print on the clinic room printer. You can generate letters from List Views as well as automatically on scheduling / authorising appointments (via 'Message Events').



8.10 Message Center

Message Center

[Call list](#) | [Call details](#)

Message-context: Messages I sent

Patient	Who to call	# messages
Alfie Normal (12/12/1943)	Patient	1
Pat Pattern (12/12/1966)	Patient	1
Fred Flintstone (12/12/1979)	Patient	1
Freda Postlethwaite (12/12/1971)	Patient	1
Bonny Penne (12/12/1955)	Patient	1
Kenton Clark (01/01/1963)	Patient	1
Deborah Harry (12/12/1955)	Patient	1
Bobby Bruce (03/03/1909)	Patient	1
Luke McDuff (12/12/1965)	Patient	2
Benny Green (12/12/1934)	Busy Bee - Area Hospital (Dr)	2
Steddy Eddy (08/08/1976)	Patient	1

Click to see details of call required

Message Center

[Call list](#) | [Call details](#)

Call Healthcare professional: [Patient details](#)

Name: Bee, Busy
Address: Area Hospital
Home phone:
Mobile phone:

Messages for this recipient:

Sent at	Patient/mes
29/12/2008 15:50	Phone call
29/12/2008 15:39	Phone call

1/2

Phone call

Success No answer Undeliverable Postpone 15 minutes

Send written

Click to see full patient details screen

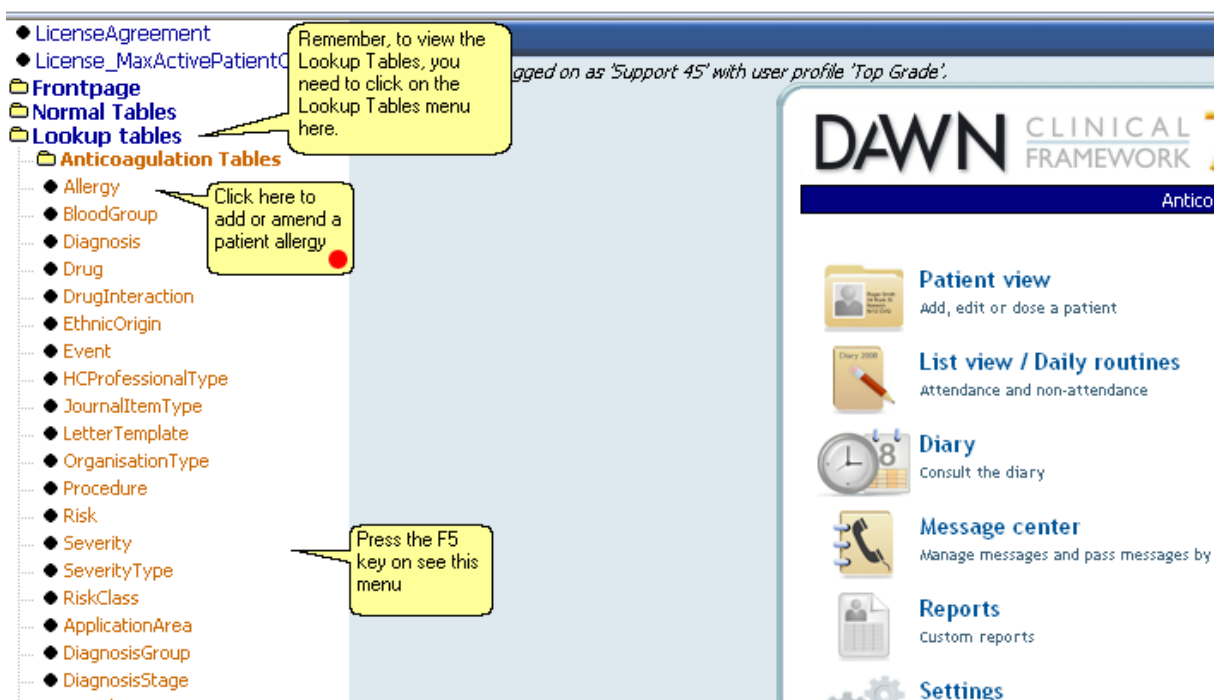
Part

IX

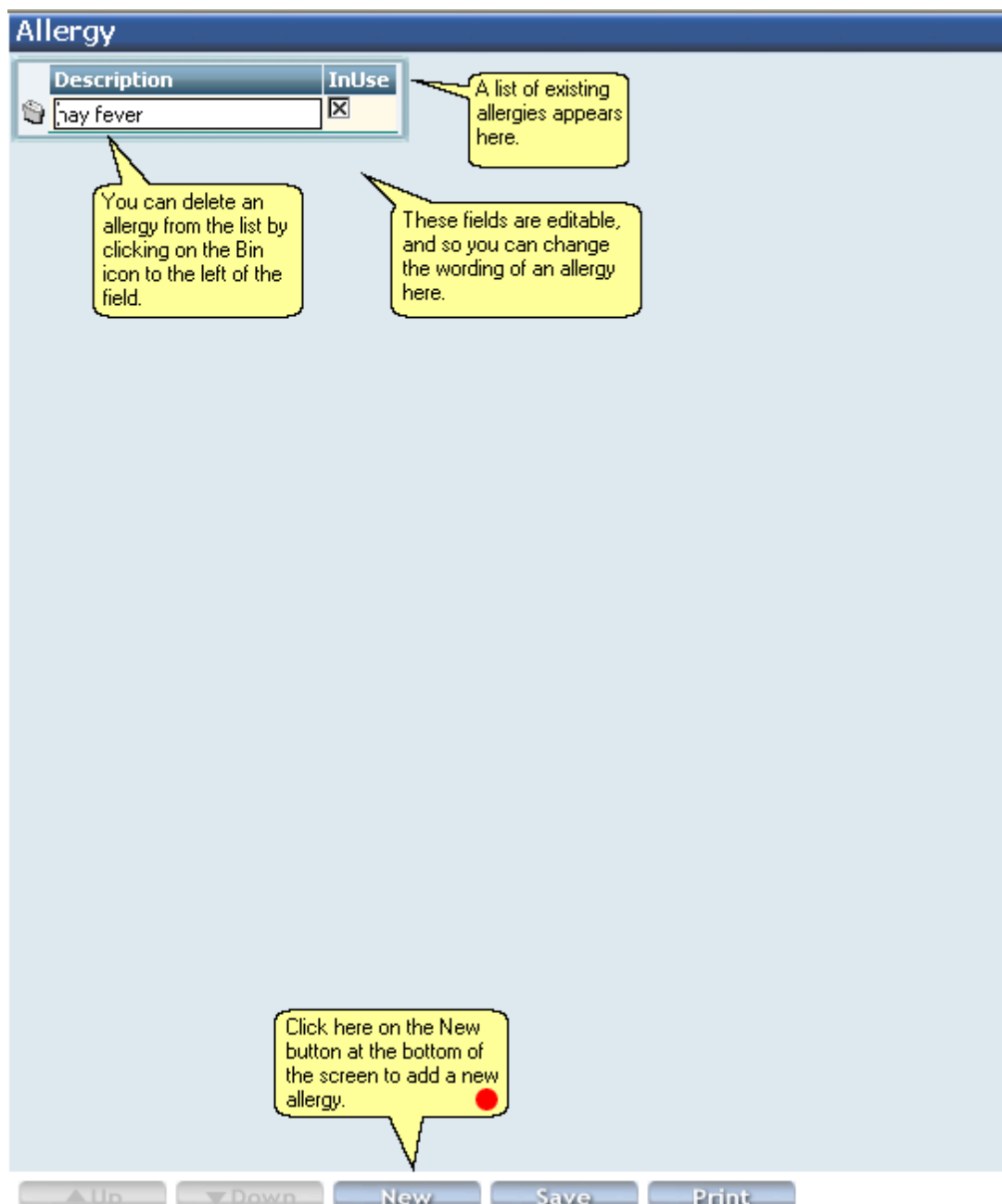
9 Configuring your system

9.1 Adding/Editing Allergies

If you need to add an allergy for a patient that does not exist in the standard list, new allergies can be added here.



9.1.1 List of Patient Allergies

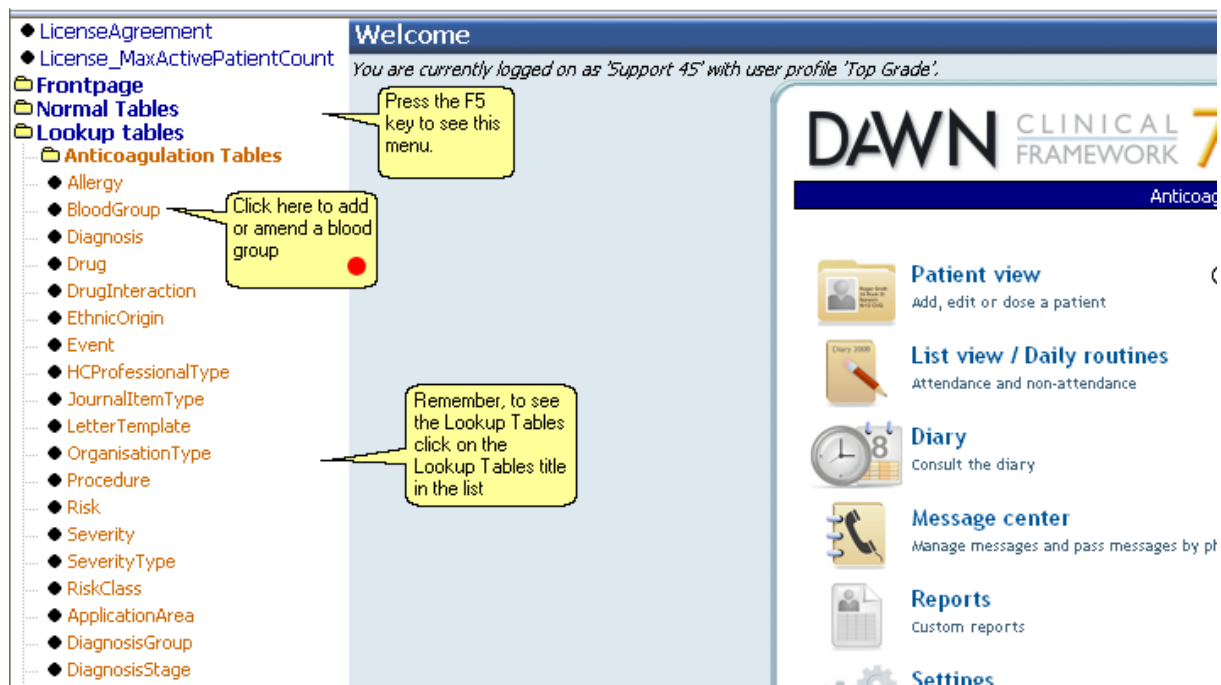


9.1.2 Adding a New Patient Allergy

The screenshot shows a web-based form titled "Allergy - New record". At the top, there is a blue header bar with the title. Below the header, the form contains two input fields: "Description *" and "InUse". The "Description *" field is highlighted with a yellow callout box that says "You can add an allergy name here. This field is mandatory and must be unique." The "InUse" field is a checkbox that is checked, and it is also highlighted with a yellow callout box that says "The InUse box must be checked in order to use this allergy." At the bottom of the form, there are three buttons: "OK", "Cancel", and "Save". A yellow callout box points to the "OK" button with the text "Click here on the OK button to save this new allergy and return to the list of allergies." The form is set against a light blue background.


9.2 Adding/Editing Blood Groups

If you need to add a blood group for a patient that does not exist in the standard list, new blood groups can be added here.



9.2.1 List of Blood Groups

BloodGroup

Description	InUse
 Positive	<input checked="" type="checkbox"/>

A list of existing blood groups appears here. These fields are editable.

You can delete a blood group by clicking on the Bin icon to the left of the record.

The InUse box must be checked in order to use this blood group.

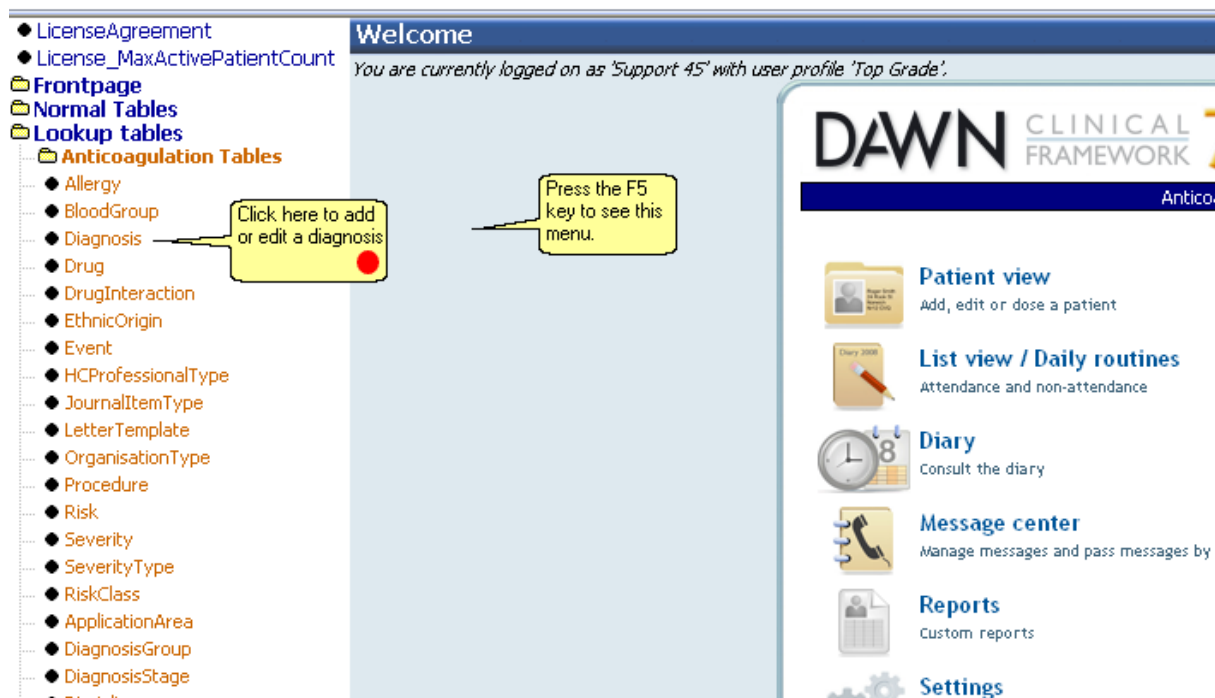
Click here on the New button to add a new blood group.

▲ Up ▼ Down New Save Print

9.2.2 Adding a Blood Group

9.3 Adding/Editing Diagnoses









If you need to add a diagnosis for a patient that does not exist in the standard list, new diagnoses can be added here.



9.3.1 List of Diagnoses

Di You can search for a particular diagnosis by description or code name in this search box

Search for: Description: CodeName:

Description	CodeName	InUse	DiagnosisGroup	DiagnosisApplicationArea
 AF/CARDIOVERSION	<input type="text"/>	<input checked="" type="checkbox"/>	thfg	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 ANEURSYM	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 ANEURSYM WITH EMBOLIC E	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 ANGIOPLA	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 ANTI-PHOSPHOLIPID SYNDRO	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 ANTITHROMBIN 111 DEFICIE	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 AORTIC ROOT REPLACEMENT	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 AORTIC VALVE DISEASE	<input type="text"/>	<input checked="" type="checkbox"/>	(None selected)	<input type="checkbox"/> Anticoagulation

Annotations:

- A list of existing diagnoses appear here. These fields are editable.
- To delete a diagnosis, you can click on the Bin icon to the left of this field (please note - if the diagnosis is logged against a patient, then it cannot be deleted)
- Click here on the New button to add a new diagnosis

9.3.2 Adding a New Diagnosis

Diagnosis - New record

Description

CodeName

InUse

DiagnosisGroup

DiagnosisStage

You can add a diagnosis name here. This field is mandatory, and must be unique.

A code name can optionally entered for this diagnosis

A diagnosis group by be chosen from the drop down list. The diagnosis groups themselves can be created elsewhere within the system.

The InUse box must be checked in order to use this diagnosis

You will need to save this new record before you can add another

Once the new record has been saved, you can optionally add diagnosis stages into this box, eg, advanced, early, etc.

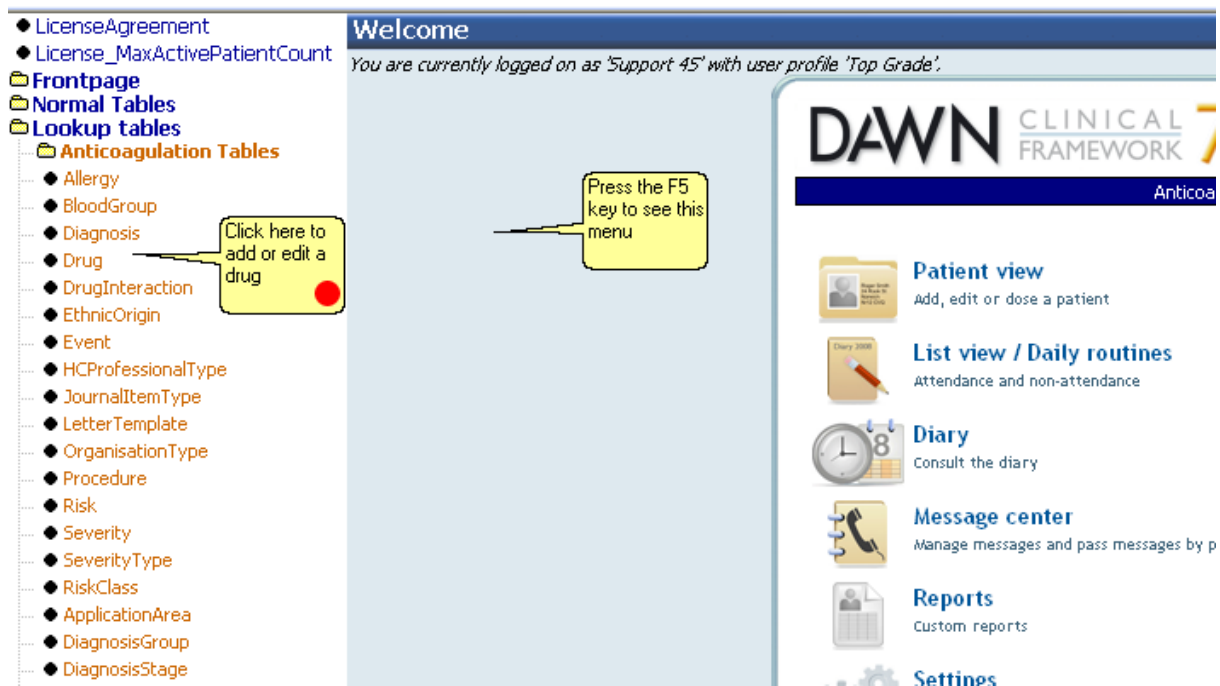
Click here on the OK button to save this record and return to the list of diagnoses.

DiagnosisApplicationArea_Diagnosis_pkiDiagnosis

OK Cancel Save

9.4 Adding/Editing Drugs








If you need to add a drug for a patient that does not exist in the standard list, new drugs can be added here.



9.4.1 List of Drugs

You can search for a particular drug by description or interaction level using this search box.

Search for: Description: Relevant interaction:

Description	Relevant interaction	Relevant for	InUse
 8-DEOXYCYCLINE	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 ACETAZOLANIDE	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 ACTON EFF. TABLETS	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 ADIFAX	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 ALKA SELTZER	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 ALLOPURINOL	(None selected)	<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology	<input checked="" type="checkbox"/>
 AMILORIDE	(None selected)	<input type="checkbox"/> Anticoagulation	<input checked="" type="checkbox"/>

To delete a drug, click on the Bin icon to the left of this field (please note - if a drug is logged against a patient then it cannot be deleted)

To view further drug details, click on the Form icon to the left of this field.

Click here on the New button to add a new drug

A list of existing drugs appear in a list

These fields are editable.

Up Down New Save Details Print

9.4.2 Adding a New Drug

Drug - New record

Description *

Relevant interaction (None selected)

DrugNotes

Relevant for InUse

Customization **Templates**

CustomizeDrugForPatient

PatientCustomizationNotes

OK **Cancel** **Save**

A drug name can be added here. This field is mandatory, and must be unique.

You can choose an interaction level from the scroll down list.

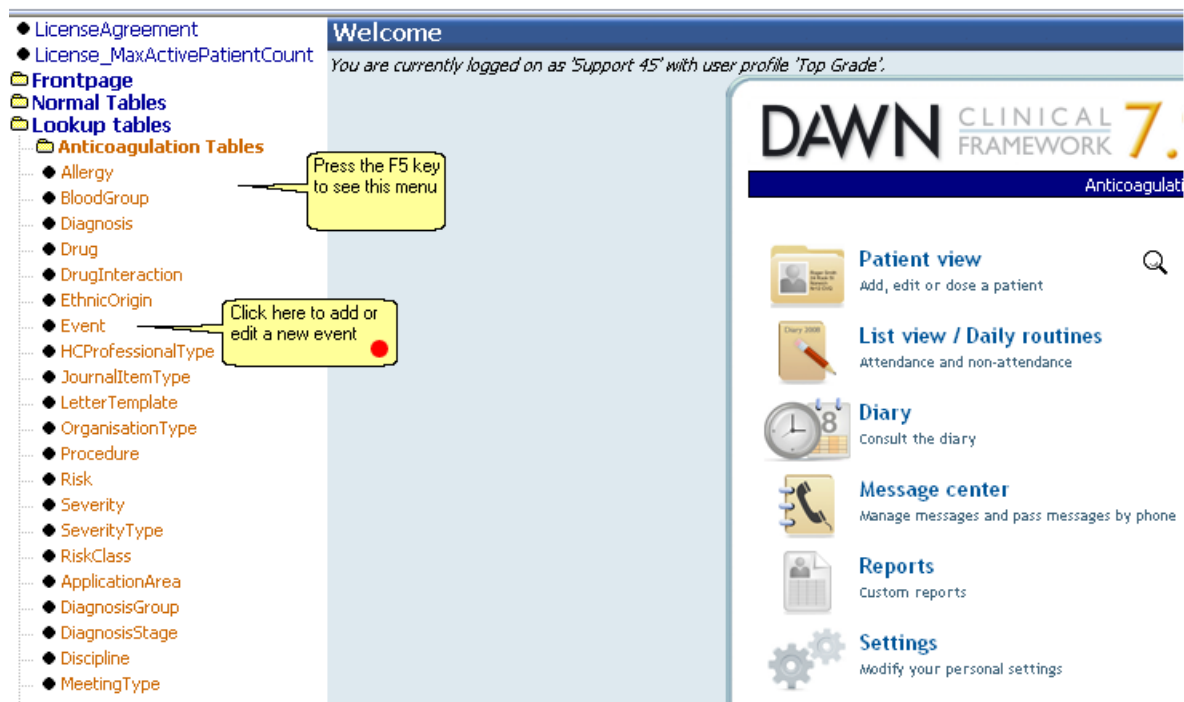
You can optionally add any drug notes here. Clicking on the Cross symbol to the left of this notes box will expand the field.

The InUse box must be checked in order to use this drug.











Click here on the OK button to save this record and return to the list of drugs.






9.5 Adding/Editing Events

If you need to add an event for a patient that does not exist in the standard list, new events can be added here.



9.5.1 List of Events

Event				
Description	WarnLevel	DurationOfWarning	Event	Relevant for
 EMBOLISM UNSPECIFIED	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 BEEN UNWELL	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 BLEED LOWER GI	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 BLEED UPPER GI	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 BLEEDING	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 BRUISING , UNEXPLAINED	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 CEREBRAL HAEMORRHAGE	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 CHLORIDE	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 CHLORIDE	Always warn			<input type="checkbox"/> Anticoagulation <input type="checkbox"/> Clinical Haematology <input type="checkbox"/> Rheumatology
 EXTRA ALCOHOL	Always warn			<input type="checkbox"/> Anticoagulation

 Up
  Down
  New
  Save
  Print

A list of existing events appear in a list
 The existing event fields are editable
 To delete an event, click on the Bin icon to the left of the record (please note - if the event is logged against a patient, then it cannot be deleted)
 You can use the Down button to scroll down the list of existing events. These will appear in alphabetical order to make searching easier.
 Click here on the New button to add a new event

9.5.2 Adding a New Event

Event - New record

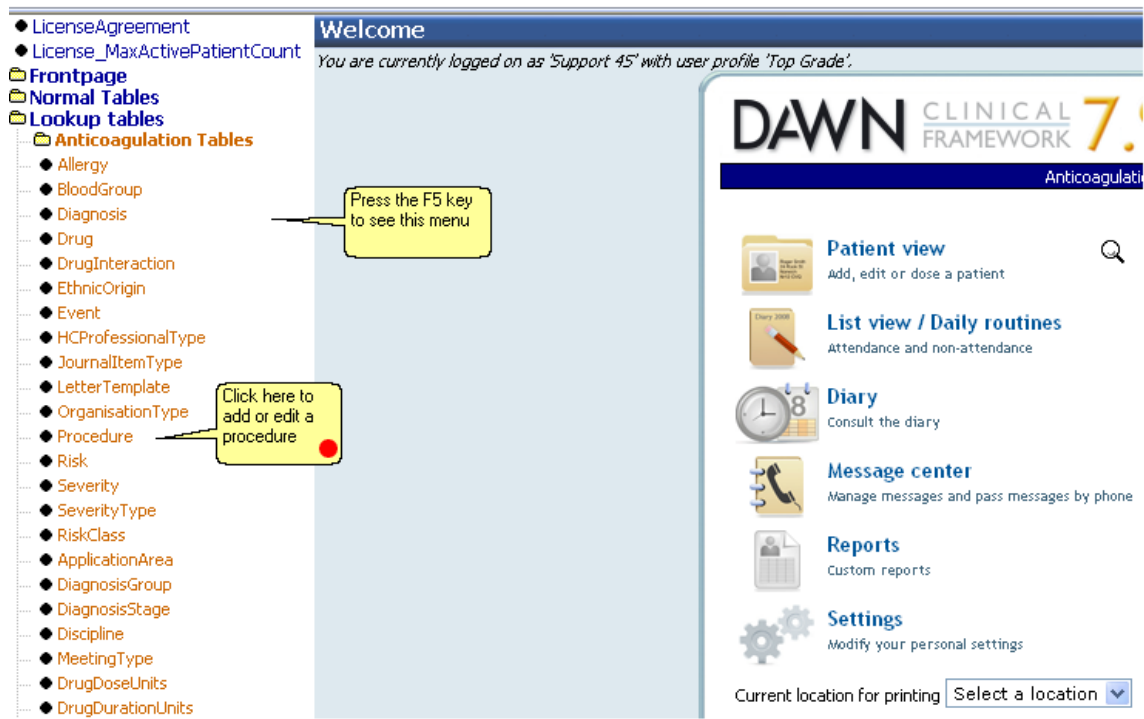
Description	*	<input type="text"/>	An event name can be added here. This field is mandatory, and must be unique.
WarnLevel	*	(Make a choice) ▼	A warn level must be chosen from the drop down list, eg, always warn, initially warn, etc.
DurationOfWarning		<input type="text"/>	A duration of warning can be specified in days. For example, if a user wanted to be warned that a patient is taking this drug for the first week of use, then we would enter a value of 7. This means that the user will be warned for 7 days from the drug start date and then not warned after this time.
Event		<input type="text"/>	
Relevant for InUse		<input checked="" type="checkbox"/>	The InUse box must be checked in order to use this event

Click here on the OK button to save this record and go back to the list of events

OK Cancel Save



9.6 Adding/Editing Procedures

If you need to add a procedure for a patient that does not exist in the standard list, new procedures can be added here.



9.6.1 List of Procedures

Procedure

Description	WarnLevel	PreWarnDuration	PostWarnDuration	Re
 Cardioversion	Always Warn	5	5	
 Dental	Always Warn	5	5	

To delete a procedure, you can click on the Bin icon to the left of the record (please note - if the procedure is logged against a patient, then it cannot be deleted)

A list of existing procedures appear in a list. These fields are editable.

Click here on the New button to add a new procedure

Up Down New Save Print

9.6.2 Adding a New Procedure

Procedure - New record

Description *	<input type="text"/>
WarnLevel *	(Make a choice) ▼
PreWarnDuration	<input type="text" value="0"/>
PostWarnDuration	<input type="text" value="0"/>
Relevant for InUse	<input checked="" type="checkbox"/>

A procedure name can be added here. This field is mandatory and must be unique.

A warn level needs to be chosen for this procedure, eg, initially warn, always warn, etc

The InUse box must be checked in order to use this procedure

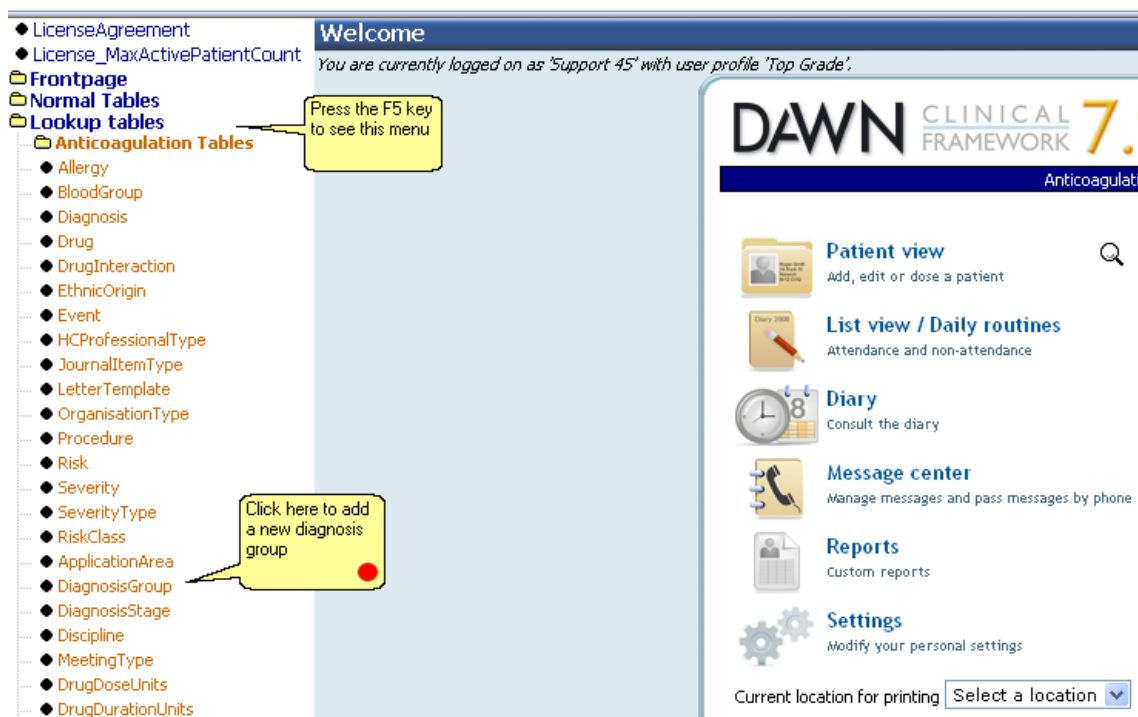
The pre warn and post warn duration can be specified here in days. For example, if a user wanted to be warned of a patients procedure for a week before the procedure date and two weeks after the procedure date, then the pre and post warn values would be 7 and 14.

Click here on the OK button to save the record and return to the list of procedures.

OK Cancel Save

9.7 Adding/Editing Diagnosis Groups



If you need to add a diagnosis group for a diagnosis that does not exist in the standard list, new diagnosis groups can be added here.



9.7.1 List of Diagnosis Groups

DiagnosisGroup

Search for: Name:

Name	OrderNr	InUse
 blood disorders	10	

You can search for a particular diagnosis group by name in this search box

To delete a diagnosis group, you can click on the Bin icon to the left of the record (please note - if the diagnosis group is logged against a diagnosis, then it cannot be deleted)

A list of existing diagnosis groups will appear. These fields are editable.

Click here on the New button to add a new diagnosis group

Up Down New Save Print

9.7.2 Adding a New Diagnosis Group

DiagnosisGroup - New record

Name *

OrderNr

InUse ☐

Diagnosis

You can add a diagnosis group name here. This field is mandatory, and the name must be unique.

An order number for the group must be specified here. This will determine what order each group will appear in when in a list.

The InUse box must be checked in order to use this group

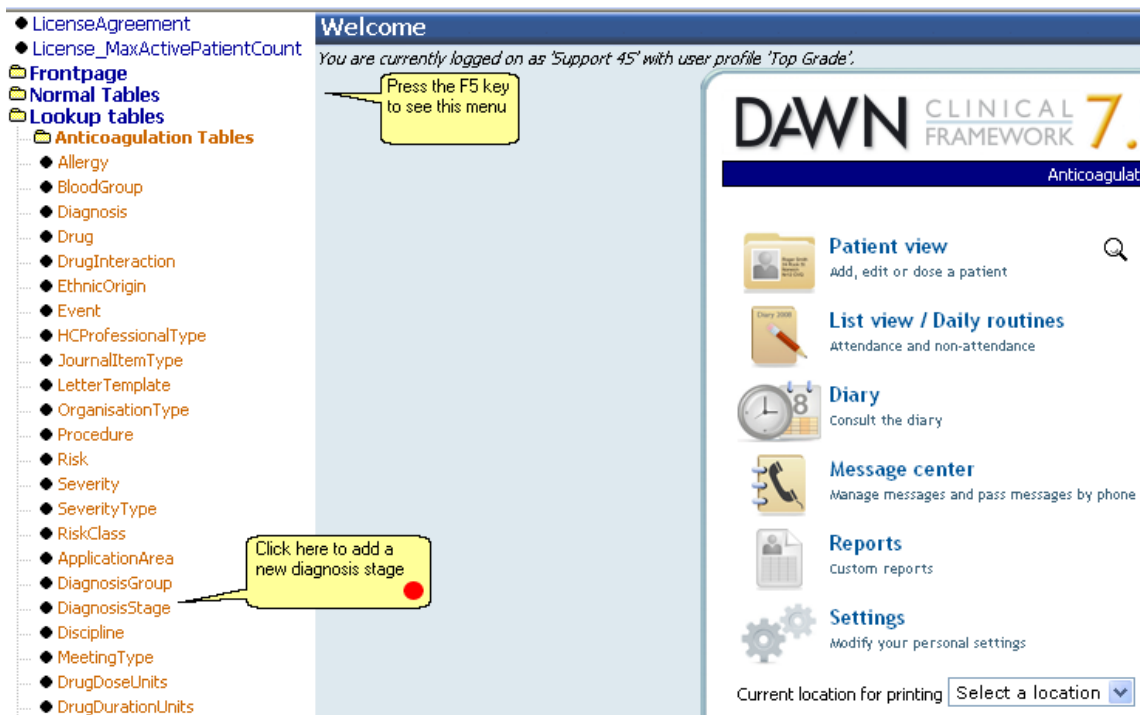
Once the record is in use, all the diagnoses that belong to this diagnosis group will appear in this box.

Click here on the OK button to save this record and return to the list of diagnosis groups

OK Cancel Save

9.8 Adding/Editing Diagnosis Stages

If you need to add a diagnosis stage for a diagnosis that does not exist in the standard list, new diagnosis stages can be added here.



9.8.1 List of Diagnosis Stages

DiagnosisStage

You can search for a particular diagnosis stage by name in this search box

Search for: Name:

Diagnosis	Name	OrderNr	InUse
- RHEUMATIC HEART DISEASE	Initial	10	<input checked="" type="checkbox"/>

To delete a diagnosis stage, you can click on the Bin icon to the left of the record (please note - if the diagnosis stage is logged against a diagnosis, then it cannot be deleted)

A list of existing stages will appear here. These fields are editable.

Click here on the New button to add a new diagnosis stage

▲ Up ▼ Down New Save Print

9.8.2 Adding a New Diagnosis Stage

The screenshot shows a web form titled "DiagnosisStage - New record". The form contains the following fields:

- Diagnosis ***: A dropdown menu with the text "(Make a choice)". A callout bubble points to it with the text: "A diagnosis must be chosen for the stage from the drop down list".
- Name ***: A text input field. A callout bubble points to it with the text: "A diagnosis stage name can be added here. This field is mandatory."
- OrderNr**: A text input field containing the value "20". A callout bubble points to it with the text: "An order number must be specified for the diagnosis stage. This determines what order each diagnosis stage will appear in a list."
- InUse**: A checkbox. A callout bubble points to it with the text: "The InUse box must be checked in order to use this record."

At the bottom of the form, there is a callout bubble pointing to the "OK" button with the text: "Click here on the OK button to save this record and return to the list of diagnosis stages." Below the form are three buttons: "OK", "Cancel", and "Save".

9.9 Adding/Editing WarnLevel

If you need to add warn levels to drugs, events, etc that do not exist in the standard list, new warn levels can be added here.

Lookup tables

Anticoagulation Tables

- ◆ Allergy
- ◆ BloodGroup
- ◆ Diagnosis
- ◆ Drug
- ◆ DrugInteraction
- ◆ EthnicOrigin
- ◆ Event
- ◆ HCProfessionalType
- ◆ JournalItemType
- ◆ LetterTemplate
- ◆ OrganisationType
- ◆ Procedure
- ◆ Risk
- ◆ Severity
- ◆ SeverityType
- ◆ RiskClass
- ◆ ApplicationArea
- ◆ DiagnosisGroup
- ◆ DiagnosisStage
- ◆ Discipline
- ◆ MeetingType
- ◆ DrugDoseUnits
- ◆ DrugDurationUnits
- ◆ DrugMedium
- ◆ DrugVolumeUnits
- ◆ Frequency
- ◆ WarnLevel
- ◆ VisitType

Press the F5 key to see this menu

Click here to add/edit the warn levels

DAWN CLINICAL FRAMEWORK 7.0

Anticoagulation



Patient view

Add, edit or dose a patient



List view / Daily routines

Attendance and non-attendance



Diary

Consult the diary



Message center

Manage messages and pass messages by phone



Reports

Custom reports



Settings

Modify your personal settings

Current location for printing



Category	Induction	Maintenance	Expla
No. of Active Patients	1	7	Patien
Missed Test	0	1	Needs
No next test date		2	Needs
No INR today	0	0	Await

9.9.1 List of WarnLevels



WarnLevel

Search for: WarnGroup: Name: WarnLevel: WarningImage:



Drugs

Name	WarnLevel	WarningImage	AlwaysWarn	InUse
 Always warn	-1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
 Initially warn	0		<input type="checkbox"/>	<input checked="" type="checkbox"/>



Events

Name	WarnLevel	WarningImage	AlwaysWarn	InUse
 Always warn	-1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
 Initially warn	0		<input type="checkbox"/>	<input checked="" type="checkbox"/>

Procedures


Name	WarnLevel	WarningImage	AlwaysWarn	InUse
 Always Warn	-1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
 Initially warn	0		<input type="checkbox"/>	<input checked="" type="checkbox"/>

Risks

Name	WarnLevel	WarningImage	AlwaysWarn	InUse
 Always warn	-1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
 Initially Warn	0		<input type="checkbox"/>	<input checked="" type="checkbox"/>

To delete a record, you can click on the Bin icon to the left of the row. If the record is already being used, then it cannot be deleted.

These existing warn level fields are editable

Click here to add a new Warn Level 

All the different warn levels are grouped by table, eg, all warn levels belonging to drugs within the system are displayed under the 'Drugs' section

You can search for a particular warn level by group, name, warn level and warning image in this search box

Up Down New Save Print

9.9.2 Adding a New WarnLevel

WarnLevel - New record

WarnGroup	*	(Make a choice) ▼
Name	*	<input type="text"/>
WarnLevel	*	<input type="text"/>
WarningImage		<input type="text"/>
AlwaysWarn		<input type="checkbox"/>
InUse		<input checked="" type="checkbox"/>
TestCharValueOption		<input type="checkbox"/>

You will need to save this new record before you

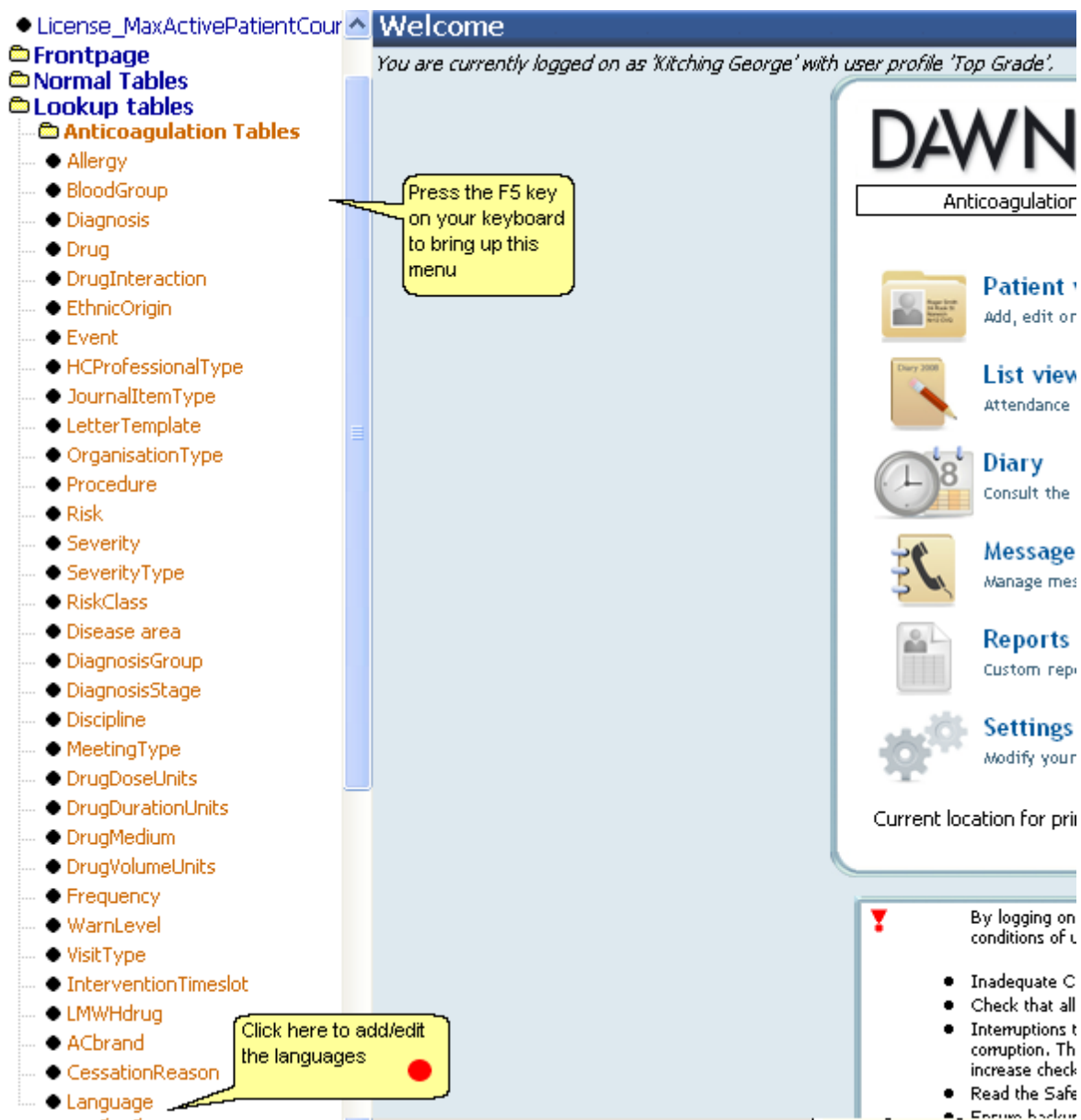
OK Cancel Save

Annotations:

- A Warn group must be chosen for the Warn Level. This determines what the warn level will be used against, eg, drugs, events, etc.
- A warn level name needs to be added, and also a warn level number. This will determine in which order the levels appear in a list within the system.
- A warning image can optionally be added here. This image will appear beside the warn level when chosen.
- You can optionally tick the Always Warn checkbox. This will mean that if this warn level is chosen then the user will always be alerted to the drug, event, etc.
- The InUse box must be checked in order to use this warn level
- Click here on the OK button to save this record and return to the list of warn levels

9.10 Adding/Editing Languages



If you need to add a language for a patient that does not exist in the standard list, new languages can be added here.



9.10.1 List of Languages

Language

Search for: Name: CodeName:

	Name	CodeName	OrderNr	Int
	English	ENG	0	<input checked="" type="checkbox"/>
	French	FR	0	<input checked="" type="checkbox"/>

You can search for a particular language entry by name or code name here

To delete a language, click on the Bin icon and then choose the Save button at the bottom of the screen

A list of existing editable language entries appears here.

Click here on the New button to add a new language

9.10.2 Adding a New Language

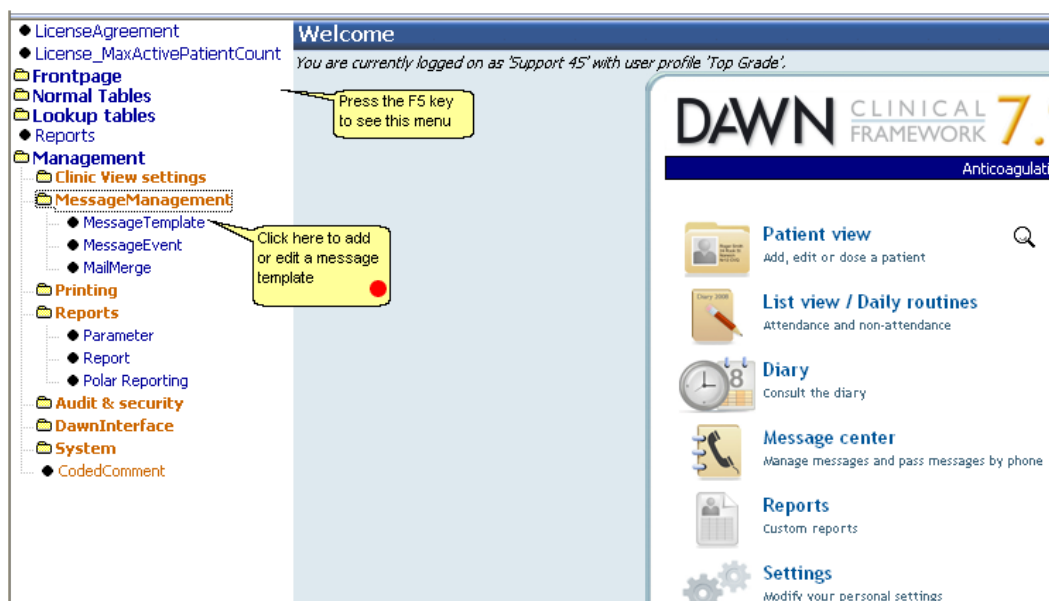
The screenshot shows a web-based form titled "Language - New record". The form contains four fields: "Name" (with a red asterisk), "CodeName" (with a red asterisk), "OrderNr" (containing the value "0"), and "InUse" (a checkbox that is checked). Below the form are three buttons: "OK", "Cancel", and "Save".

Four yellow callout boxes provide instructions:

- Top right: "You must add a name and code name for the new language here. These fields must be unique."
- Bottom left: "The in use box must be checked in order to use this language"
- Bottom center: "The order number specifies in what order the language appears in the available list"
- Bottom left (near OK button): "Click here on the OK button to save your new language and move back to the list of languages" (with a red dot pointing to the OK button)

9.11 Adding/Editing a Message Template

Letters and forms can be configured within the DAWN system. These need to be tested thoroughly if edited or added. The support team at DAWN can configure message templates for you if these are needed. Please test any new/amended message templates carefully before using with real patient data.



9.11.1 List of Message Templates

MessageTemplate

record 1 - 50 / 105

Name	PrinterPaperType	InUse
▶ [**Part**] Site Specific Style Settings		<input type="checkbox"/>
Frenchay Dose Letter		<input checked="" type="checkbox"/>
[**cPart**] Full next test day name and date		<input checked="" type="checkbox"/>
[**cPart**] First 2 lines of current dose		<input checked="" type="checkbox"/>
[**cPart**] dose change flag		<input checked="" type="checkbox"/>
[**Part**] HTML Style Sheet - compact		<input type="checkbox"/>

A list of existing message templates will appear in a list. You can click on any record in the list to view further details

Name:

Notes:

PrintablePatientMessage: ☐

MailMergeType:

DescriptionTemplate:

Template (HTML) Preview Used in events

PrinterPaperType:

☒

```

DIV {margin-left: 15mm}
.pagetable {width: 183mm;height: 237mm;margin-top: 47mm}
.lefttable {width:81mm}
.righttable {width: 101mm}
.address {padding-left: 8mm;height: 74mm;vertical-align:top; font-family: "arial", "helvetica",sans-serif;font-size: 12pt}
.hosno {height: 7mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 12pt}
.nhsno {height: 5mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 10pt}
.lastname {height: 5mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 12pt}
.firstname {height: 5mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 12pt}
.dob {height: 11mm;vertical-align: top;font-family: "arial", "helvetica",sans-serif;font-size: 12pt}
.historycomment {height: 4mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 8pt}
.titleheight {height:10mm;vertical-align: center;font-family: "arial", "helvetica",sans-serif;font-size: 8pt}
.Date {width: 10mm;font-family: "arial", "helvetica",sans-serif;font-size: 8pt;vertical-align: bottom}
.INR {width: 10mm;font-family: "arial", "helvetica",sans-serif;font-size: 8pt;vertical-align: bottom}
  
```

You can optionally click on the arrow buttons to look through each existing message template record

Click here on the New button to add a new message template

InUse CustomM (selected)

Navigation buttons: << < > >> New Delete Save Print

9.11.2 Adding a New Message Template

Message **Add New record**

Name * [Text Field] *A message template name needs to be added. This name must be unique.*

Notes [Text Area] *Message template notes can optionally be added here.*

PrintablePatientMessage ☐ *The Printable Patient Message must be checked for the template to appear in the list of available templates.*

MailMergeType * (Make a choice) [Dropdown] *A mailmerge type must be chosen for the message template.*

DescriptionTemplate [Text Area] *A description for the message template can be added. This description will appear when an audit of messages sent is viewed.*

Template (HTML) **Preview** **Used in events**

PrinterPaperType (None selected) [Dropdown] *You can choose a paper type for this message template. This may affect which printer the message is printed to.*

Using these tabs, you can preview the message template, and specify whether it is used in any message events.

You can add the message template text here. PLEASE NOTE - The letter itself needs to be in HTML format. To pull patient data into the letter, we use data items, such as {PatientDOB}. For a full list of available data items, please contact the DAWN support team.

InUse ☒ *The InUse box needs to be checked in order to use this message template*

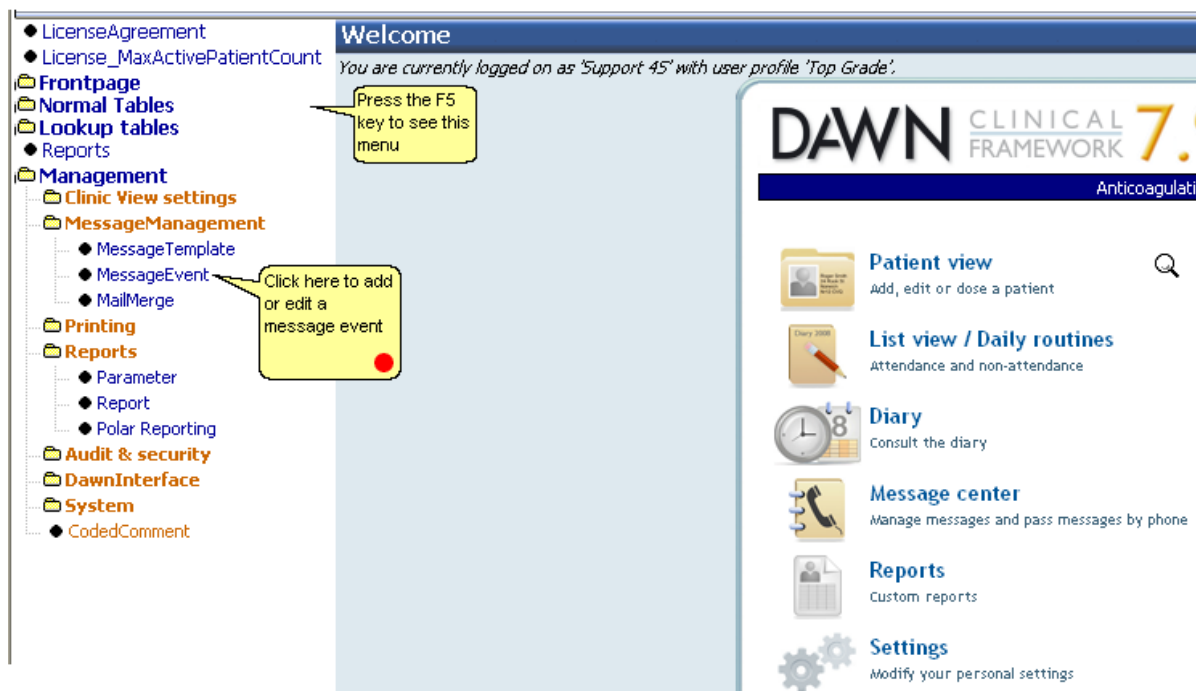
CustomModule (None selected) [Dropdown]

Click here on the OK button to save this message template and return to the list of message templates

OK **Cancel** **Save**



9.12 Adding/Editing a Message Event

Message events can be created so that messages can be automatically printed, faxed, emailed or sent to a phone list when certain actions are carried out within the system. Please test messaging settings carefully before using with real patient data.



9.12.1 List of Message Events

MessageEvent

	Caption	Event Type	Template	Patient message
	Dose Letter	Patient_ManualMessage	Dose Letter	Written
	DNA Letter	Patient_ManualMessage	DNA Letter	Written

To view further message event details, click on the Form icon to the left of a record.

A list of existing message events appears here. These fields are editable.

To delete a message event, click on the Bin icon to the left of the record.

Click here on the New icon to add a new message event

< Up Down New Save Details Print

9.12.2 Adding a New Message Event

MessageEvent - New record

Caption	<input type="text"/>	A message event name can be specified here.
EventType	* (Make a choice)	An event type must be chosen. This will determine when a message is automatically sent. This can trigger on actions like scheduling a patient, closing a visit, etc. The message template section determines which message template is sent.
Template	* (Make a choice)	
Patient message	(Send no message)	
NextOfKin message	(Send no message)	
GP message	(Send no message)	
Consultant message	(Send no message)	
HCprofs message	* (Make a choice)	
Keep informed level	(None selected)	
HCPProfessionalType	(None selected)	
ClinicViewTableMessageEvent	You will need to save this new record before you can add related records	
InUse	<input checked="" type="checkbox"/>	The InUse box must be checked in order to use this message event
PrinterPaperType	(None selected)	A printer paper type can be chosen for the message event. This will determine which printer the message will be printed to (if a written message) on the message event

You can set up a message event which enables the user to print a bulk message for many patients on a list view. Once this record is saved, the clinic view(s) you wish to use the message event on can be chosen here.

The patient message fields, next of kin, GP and so on determine who the message is sent to, and how it is sent. For example, the patient message can be set as 'written', which means that the patient will be sent a written message.

Click here on the OK button to save this record and return to the list of message events

OK Cancel Save

9.13 Setting up a Cessation Reason

Different cessation reasons can be set up within DAWN so that this can be chosen within the patient's treatment plan.

Please note - once a cessation reason has been added into DAWN, the cessation reason will then become a mandatory field to fill in within the patient's treatment plan.

Welcome
You are currently logged on as 'Support 45' with user profile 'Top Grade'.

DAWN CLINICAL FRAMEWORK

- Patient view**
Add, edit or dose a patient
- List view / Daily ro**
Attendance and non-attend
- Diary**
Consult the diary
- Message center**
Manage messages and pass
- Reports**
Custom reports
- Settings**
Modify your personal setti

Current location for printing

Category	Induction	Ma
No.of Active Patients	1	
Missed Test	0	
No next test date		
No INR today	0	
No dose today	0	

Messages	Explan
Pending Messages	Waiting



Click here to add a new cessation reason

9.13.1 List of Cessation Reasons



CessationReason

Search for: Name: GU: **SEARCH**

Anticoagulation


Name	OrderNr	InUse
 Advised Course Completed	0	<input checked="" type="checkbox"/>
 Major Bleed	1	<input checked="" type="checkbox"/>

Rheumatology

Name	OrderNr	InUse
 allergic reaction	2	<input checked="" type="checkbox"/>
 poor response	3	<input checked="" type="checkbox"/>

You can search for a cessation reason by name here

The cessation reasons for each application area are displayed here

Click here to add a new cessation reason 

Up **Down** **New** **Save** **Print**

9.13.2 Choosing Cessation Reason Application Area

CessationReason - New record

Please select a ApplicationArea for the table
CessationReason

Anticoagulation
Clinical Haematology
Rheumatology

You need to choose an application area for the cessation reason here. You can either click on the application area and choose the OK button at the bottom of the screen, or double-click on the entry.

You can search for a particular application area here

Click here to choose an application area

OK Cancel Up Down

9.13.3 Cessation Reason Form

CessationReason - New record

ApplicationArea	Anticoagulation
Name *	<input type="text"/>
OrderNr *	<input type="text"/>
InUse	<input checked="" type="checkbox"/>

You need to add a name for this reason here

The in use box must be checked to use this reason

You must specify an order number for this reason. This will determine in what order the reason appears within a list.

You can click on here to save the reason

OK Cancel Save

9.14 Coded Comments

You can define short codes for frequently used comments; for example “nbb” for “no bleeding or bruising”.

The *CodedCommentPrefix* system setting is used to define a prefix (“.” by default) that identifies the text you type (in any notes field) as a short code.

As such you could type “.nbb” anywhere in a Patient Note, Treatment Note or Quick Note

and this would automatically expand to say “no bleeding or bruising” when the note is saved.

To define coded comments:

- Press F5 to display the system menu.
- Choose Management/Coded Comments to show the coded comments list (this is empty to start with):



- Choose the New button to add a coded comment:



- Save your comment.
- In your patient notes screen place your code, i.e. “.pc”:



- When you SAVE the coded comment, the full comment will appear on the screen:



9.15 Risk Settings

There are 3 steps involved in configuring the Risk and Risk Class:

- Set Severity for Risk
- Set Risk
- Set Risk Class



9.15.1 Severity of Risk Setting

From the Lookup tables, set Severity for Risk.

Severity

Search for: Description: SeverityType:

Drug

Description	OrderNr	InUse
A description of up to 50 characters can be added/edited here	0	<input checked="" type="checkbox"/>
Moderate	0	<input checked="" type="checkbox"/>
Significant	0	<input checked="" type="checkbox"/>

Event

Description	OrderNr	InUse
Fatal	0	<input checked="" type="checkbox"/>
Major (Hospitalisation)	0	<input checked="" type="checkbox"/>
Minor	0	<input checked="" type="checkbox"/>
Moderate (Hospitalisation)	0	<input checked="" type="checkbox"/>
Moderate (No Hospitalisation)	0	<input checked="" type="checkbox"/>

Risk

Description	OrderNr	InUse
Compliance	0	<input checked="" type="checkbox"/>
FATAL	0	<input checked="" type="checkbox"/>
FATAL	0	<input checked="" type="checkbox"/>
FATAL	0	<input checked="" type="checkbox"/>
FATAL	0	<input checked="" type="checkbox"/>
Major Haemorrhage	0	<input checked="" type="checkbox"/>
Major Thromboembolic	0	<input checked="" type="checkbox"/>

Buttons: Up, Down, New, Save, Print

Callouts:

- You can search for a particular severity to edit here
- Order numbers determine the order in which these items are displayed in the drop down menu
- Uncheck this box to remove this severity from the available options for users
- You can click here on the New button to add a new severity
- Click here to save any changes and move on to adding/editing risks

9.15.2 Risk

Add or edit Risk from the [Lookup tables](#) on the F5 menu.

Risk

Description	Severity	WarnLevel	InUse
? COMPLIANCE	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
ALCOHOL	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
BROOKER CENTRE PATIENT	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
GOT CANCER	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
HEAVY ETOH USE	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
ILLCIT PHARMACEUTICAL USE	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
PAEDIATRIC PATIENT	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
POOR COMPLIANCE	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
PROTEIN C DEFICIENCY	MODERATE	Always warn	<input checked="" type="checkbox"/>
PROTEIN S DEFICIENCY	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
Smoker	MODERATE	Always warn	<input checked="" type="checkbox"/>
TERMINAL CARE	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>
VERY DEAF	Moderate (No Hospitalisation)	Always warn	<input checked="" type="checkbox"/>

You can click on the Bin icon and then the Save button at the bottom of the screen to delete this record

Choose from the drop down box of options

Uncheck this box to remove the risk from the available options

You can add a new risk by clicking here

Click here on the Save button to save any changes and move onto adding/editing the risk classes

Up Down New Save Print

9.15.3 Risk Class

A risk class can be chosen for a patient to indicate what their risk level is, eg, high risk, low risk. This risk class appears on the top left of the main patient screen. Risk Class options can be added / edited from the Lookup Tables on the F5 menu.

RiskClass

Description	RiskLevel	ColorCode	InUse
Unclassified	0	silver	<input checked="" type="checkbox"/>
Low	1		<input checked="" type="checkbox"/>
Medium	50	#FFE0E0	<input checked="" type="checkbox"/>
High	100	#FFA0A0	<input checked="" type="checkbox"/>

Click on the bin icon and then the save button at the bottom of the screen to delete this record

The risk level is set to order the risk classes - these values must be unique

Colour coding can be set for each risk, eg, high risk can be displayed in red. Some formatting statements are needed for this.

Uncheck this box to remove the risk class from the available options

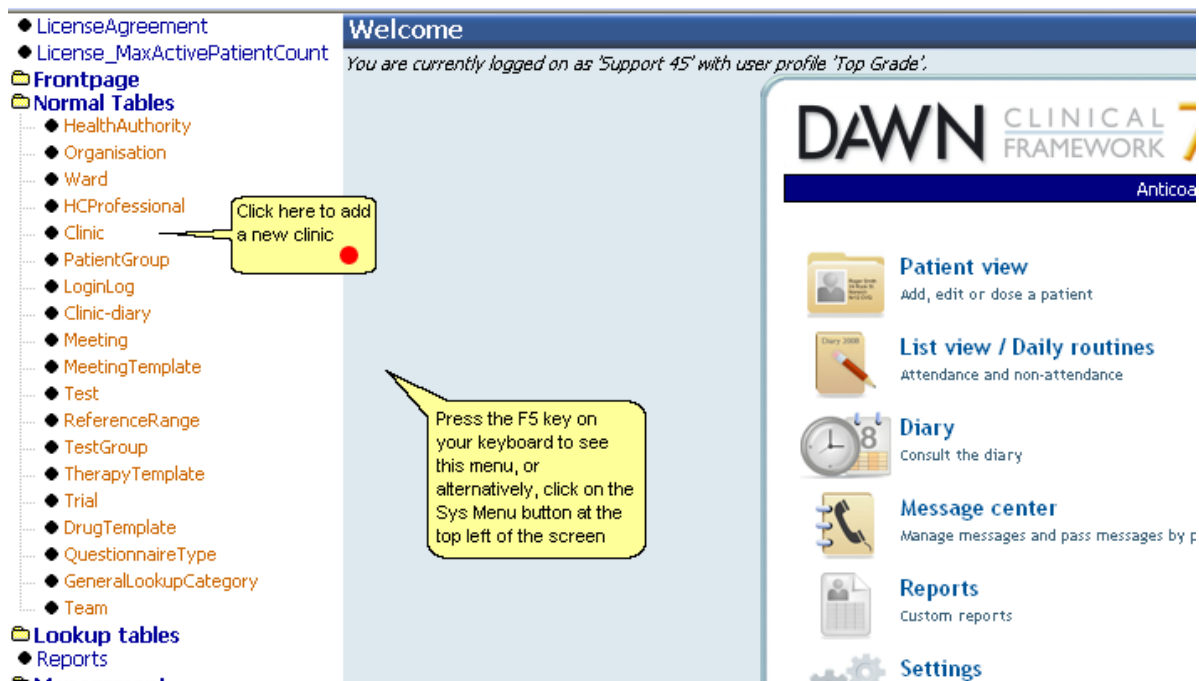
You can click on the New button to add a new risk class

Click here on the Save button to save any changes and return to the main risk settings

Up Down New Save Print

9.16 Adding a New Clinic

Clinics must be set up within the system so that patients can be booked into these clinics for each visit. Patients can also be logged as having a particular preferred clinic. You will need to set up an Organisation before creating a new clinic.



9.16.1 List of Clinics

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>

ApplicationArea:
 Description:
 Organisation:
 LocalCode:
 InUse: ☒

SlotTemplates Adjustments Create/Delete Diary

Start Time	End Time	Max. cap.	Reserved cap.	Interval	Sun	Mon	Tue	Wed	Thu	Fri	Sat
09:00	17:00	100	10	8 hours	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Click here to add a new clinic

New Delete Save

9.16.2 Adding Clinic Details

Clinic - New record

ApplicationArea * (Make a choice) ▼

Description *

Organisation * (Make a choice) ▼

LocalCode

InUse ☒

SlotTemplates **Adjustments** **Create/Delete Diary**

You will need to save this new record before you can add related records

The in use box must be checked in order to use this clinic

A clinic application area must be specified for the clinic, eg, anticoagulation

A clinic description and organisation must be specified for the new clinic. The clinic description must be unique. The clinic's local code may also optionally be added.

Click here to save the record and move onto adding slot templates

OK Cancel Save

9.16.3 Adding Slot Templates

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>
Anticoagulation	Big Hospital	Moorside Clinic	<input checked="" type="checkbox"/>

ApplicationArea:
 Description:
 Organisation:
 LocalCode:
 InUse: ☒

SlotTemplates Adjustments Create/Delete Diary

There are no items to display

Slot templates determine how the clinic diary is set up, eg, what days the clinic runs on, how many time slots for each day, how many patients in each clinic slot, etc. Click here to add a new slot template.

9.16.4 New Slot Template Form

ClinicSlotTemplate (Moorside Clinic (Big Hospital)) - New record

StartTime	*	09:00
EndTime	*	17:00
Max. cap.	*	2
Reserved cap.	*	1
Interval		10 minutes
Sun		<input type="checkbox"/>
Mon		<input checked="" type="checkbox"/>
Tue		<input checked="" type="checkbox"/>
Wed		<input checked="" type="checkbox"/>
Thu		<input checked="" type="checkbox"/>
Fri		<input checked="" type="checkbox"/>
Sat		<input type="checkbox"/>

A start and end time must be specified in the format HH:MM.

The maximum number of patients in each slot and a reserved capacity also need to be added.

The slot time interval can be added here. So on this record, DAWN will create clinic slots of 10 minutes each from 09:00am to 5:00pm.

Each ten minute slot will have a capacity of 2 patients, with 1 reserved slot.

You can specify which days you would like this slot template to apply to here.

A reserved capacity is used to deal with any extra patients who may come into the clinic. So DAWN will not automatically book patients into these reserved slots, but the user can use these extra slots if a clinic is full.

Click here to save the record

OK Cancel

9.16.5 Saved Slot Template Form

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>
Anticoagulation	Big Hospital	Moorside Clinic	<input checked="" type="checkbox"/>

Anticoagulation

Moorside Clinic

Click here to add a new clinic adjustment

You can optionally add more slots by clicking on the blue form icon on the top left of this tab

InUse ☒

Slot Templates Adjustments Create/Delete Diary

Start Time	End Time	Max. cap.	Reserved cap.	Interval	Sun	Mon	Tue	Wed	Thu	Fri	Sat
09:00	17:00	2	1	10 minutes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Your saved slot template will appear here

Navigation buttons: Previous, Next, New, Delete, Save

9.16.6 Clinic Adjustment Form

ClinicSlotAdjustedCapacity (Moorside Clinic (Big Hospital)) - New record

Select a date (up to 31 days) | Show all

Search

A clinic adjustment description can be specified here

Description: Public Holiday

StartDate: 31/08/2009

EndDate: 04/09/2009

StartTime: 09:00

EndTime: 17:00

% ? ☒

Give relative percentage, like 50 or 125

Cap. adj.: 50

Res.Cap. adj.: 50

Sun ☐

Mon ☒

Tue ☒

Wed ☒

Thu ☒

Fri ☒

Sat ☐

The dates you would like the adjustment to be effective for can be added here. You can choose a particular date by clicking on the calendar icon to the right of these fields.

The time period in which you would like the adjustment to be valid can be added here in the format HH:MM.

You can either express the clinic adjustment as a percentage of the original number of slots, ie, the record here will reduce the number of slots by 50%, or you can type in the exact number of slots that you want in this adjustment.

To add in the exact number, you need to uncheck the %? checkbox.

Clinic adjustments can be used to either increase or reduce the number of available clinic slots on a particular day or period of time.

Click here to save this record

OK Cancel

9.16.7 Saved Clinic Adjustment Form

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>
Anticoagulation	Big Hospital	Moorside Clinic	<input checked="" type="checkbox"/>

ApplicationArea:
 Description:
 Organisation:
 LocalCode:
 InUse: ☒

SlotTemplates Adjustments **Create/Delete Diary**

Description	StartDate	EndDate	StartTime	EndTime	% ?	Cap. adj.	Res.Cap. adj.
public holiday	31/08/2009	04/09/2009	09:00	17:00	<input checked="" type="checkbox"/>	50	50

You can optionally add more clinic adjustments by clicking on the blue form icon to the top left of this tab

Your saved clinic adjustment will appear here

<< < > >> New Delete Save

9.16.8 Creating the Diary

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>
Anticoagulation	Big Hospital	Moorside Clinic	<input checked="" type="checkbox"/>

ApplicationArea Anticoagulation
Description Moorside Clinic
Organisation Big Hospital
LocalCode
InUse ☒

SlotTemplates
Ledgend:
 2009 - 26 C
 2009 - 27 Week with appointment
 2009 - 28 Week about to be deleted
Last day in diary No diary available
of weeks to create Select...
of weeks to delete Select...

You can decide how many weeks you would like to create the diary for from the scroll down list here (the maximum option is 8 weeks)

Click here to create the diary for the next 8 weeks

Create diary
 Remove data from diary

Once you have created your clinic diary, DAWN will automatically extend these diary slots into the future for you

You can also delete the diary for a set number of weeks here

Navigation: Previous, Next, New, Delete, Save

9.16.9 Clinic Diary Slots

Clinic

ApplicationArea	Organisation	Description	InUse
Anticoagulation	4S Dawn Clinical Software	Anticoagulation Clinic	<input checked="" type="checkbox"/>
Anticoagulation	Big Hospital	Moorside Clinic	<input checked="" type="checkbox"/>

ApplicationArea:
 Description:
 Organisation:
 LocalCode:
 InUse: ☒

SlotTemplates Adjustments **Create/Delete Diary**

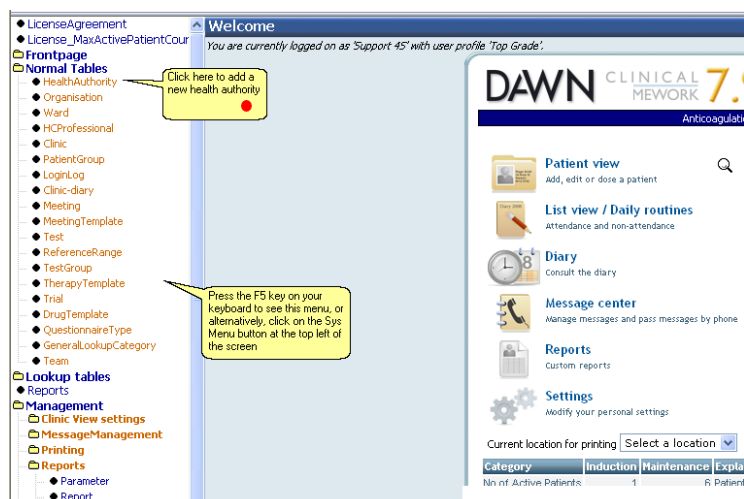
2009 - 26 21/06/2009 480 (240)	2009 - 27 28/06/2009 480 (240)	2009 - 28 05/07/2009 480 (240)	2009 - 29 12/07/2009 480 (240)	2009 - 30 19/07/2009 480 (240)	2009 - 31 26/07/2009 480 (240)	2009 - 32 02/08/2009 480 (240)	2009 - 33 09/08/2009 480 (240)
Legend: 2009 - 26 Current week 2009 - 27 Week with appointments 2009 - 28 Week about to be deleted Last day of diary							

Once the clinic is in use, any weeks with patient appointments will be highlighted in yellow
 Your new clinic diary slots are displayed here broken down by weeks. You can optionally click on each block of slots to view them in more detail
 Remove data from diary

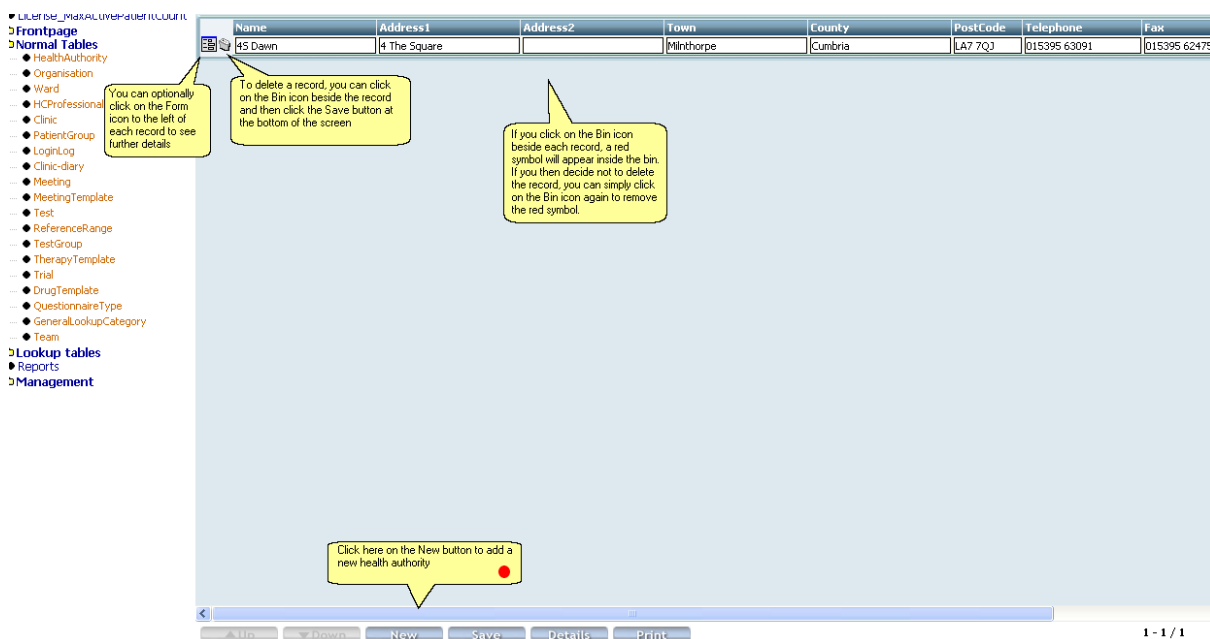
<< < > >> New Delete Save Print

9.17 Adding a Health Authority

Health Authorities can be added into the system in order to group organisations for reporting purposes. A health authority needs to be added before an organisation can be created.



9.17.1 List of Health Authorities



9.17.2 Adding a New Health Authority

The screenshot shows a web-based form for adding a new health authority. On the left is a navigation menu with categories: **License_MaxActivePatientCount**, **Frontpage**, **Normal Tables** (containing HealthAuthority, Organisation, Ward, HCProfessional, Clinic, PatientGroup, LoginLog, Clinic-diary, Meeting, MeetingTemplate, Test, ReferenceRange, TestGroup, TherapyTemplate, Trial, DrugTemplate, QuestionnaireType, GeneralLookupCategory, Team), **Lookup tables**, **Reports**, and **Management**.

The main form fields are:

- Name:** Lakeside County
- Address1:** 28 Chatsworth Ave
- Address2:** Scotforth
- Town:** Lancaster
- County:** Lancashire
- PostCode:** LA44 5DR
- Telephone:**
- Fax:**
- Email:**
- Organisation:** A dropdown menu showing 'Big Hospital'.
- HealthAuthorityStaff:** A section with the text 'There are no items to display'.
- InUse:** A checkbox that is currently checked.

Callouts provide additional information:

- 'You can add or edit health authority details here' points to the top of the form.
- 'Once the record is in use, the organisations belonging to this health authority will be displayed here automatically' points to the Organisation dropdown.
- 'Once the record is in use, the health authority staff belonging to this health authority will be displayed here automatically' points to the HealthAuthorityStaff section.
- 'Click here on the Save button to save this record and go back to the list of health authorities' points to the Save button at the bottom.

At the bottom of the form are buttons: New, Delete, Save, To list, and Print. The page number '2 / 2' is in the bottom right corner.

9.18 Adding/Editing Organisation Types

If you need to add a type for an organisation that does not exist in the standard list, new types can be added here.

LicenseAgreement
License_MaxActivePatientCount
Frontpage
Normal Tables
Lookup tables
Anticoagulation Tables
 Allergy
 BloodGroup
 Diagnosis
 Drug
 DrugInteraction
 EthnicOrigin
 Event
 HCProfessionalType
 JournalItemType
 LetterTemplate
 OrganisationType
 Procedure
 Risk
 Severity
 SeverityType
 RiskClass
 ApplicationArea
 DiagnosisGroup
 DiagnosisStage
 Discipline
 MeetingType
 DrugDoseUnits
 DrugDurationUnits
 DrugMedium
 DrugVolumeUnits

Welcome
 You are currently logged on as 'Support 45' with user profile 'Top Grade'.

Press the F5 key on your keyboard to see this menu, or alternatively, click on the Sys Menu button at the top left of the screen

Click here to add a new organisation type

DAWN CLINICAL FRAMEWORK 7.0
 Anticoagulation

Patient view
 Add, edit or dose a patient

List view / Daily routines
 Attendance and non-attendance

Diary
 Consult the diary

Message center
 Manage messages and pass messages by phone

Reports
 Custom reports

Settings
 Modify your personal settings

Current location for printing:

Category	Induction	Maintenance	Exploration
No. of Active Patients	1	6	6 Patients

9.18.1 List of Organisation Types

	Description	DescriptionMulti	InUse
	Hospital	Hospitals	<input checked="" type="checkbox"/>
	GP Practice	GP Practices	<input checked="" type="checkbox"/>
	Laboratory	Laboratories	<input checked="" type="checkbox"/>
	Nursing Home	Nursing Homes	<input checked="" type="checkbox"/>
	Software Vendor	Software Vendors	<input checked="" type="checkbox"/>

A list of existing organisation types appears here. These fields are editable.

To delete an organisation type, you can click on the Bin icon to the left of the record (please note - if the organisation type is logged against an organisation, then it cannot be deleted)

Click here on the New button to add a new organisation type

Up Down New Save Print

9.18.2 Adding a New Organisation Type

The screenshot shows a form for adding a new organisation type. The form has a light blue background. At the top, there is a table with three rows: 'Description', 'DescriptionMulti', and 'InUse'. The 'Description' row has a red asterisk and the text 'Laboratory' in an orange box. The 'DescriptionMulti' row has an empty white box. The 'InUse' row has a checked checkbox. Below the table, there are three yellow callout boxes. The first callout points to the 'InUse' checkbox and says 'The InUse box must be checked in order to use this organisation type.' The second callout points to the 'DescriptionMulti' box and says 'You can add further organisation type details here.' The third callout points to the 'Description' box and says 'You can add a new organisation type name here. This field is mandatory and must be unique.' At the bottom of the form, there is a yellow callout box pointing to the 'OK' button, saying 'Click here on the OK button to save this record and return to the list of organisation types.' Below the callouts, there are three buttons: 'OK', 'Cancel', and 'Save'.

Description	* Laboratory
DescriptionMulti	
InUse	<input checked="" type="checkbox"/>

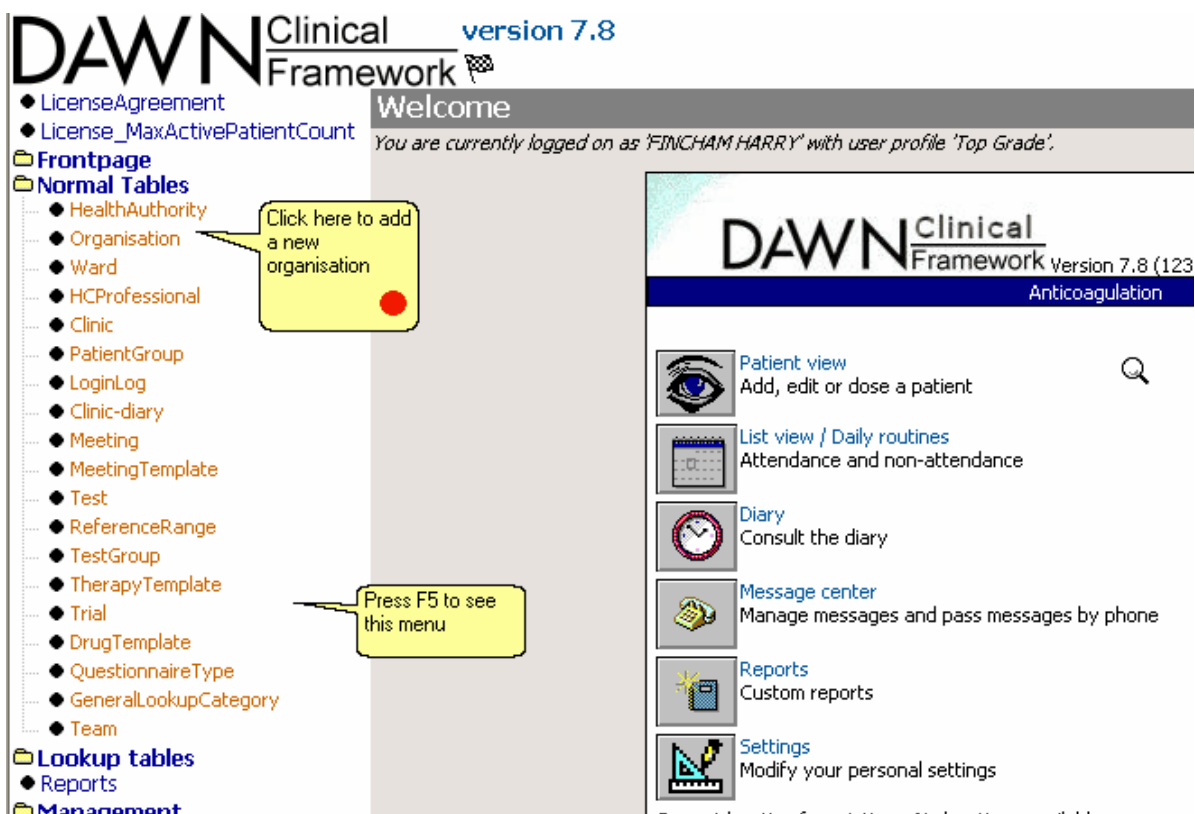
Callouts:

- You can add a new organisation type name here. This field is mandatory and must be unique.
- You can add further organisation type details here.
- The InUse box must be checked in order to use this organisation type.
- Click here on the OK button to save this record and return to the list of organisation types.

Buttons: OK, Cancel, Save

9.19 Adding a New Organisation

Different organisations can be set up within the system so that healthcare professionals and clinics can belong to a particular organisation. You must have a Health Authority set up within the system before creating a new Organisation.



9.19.1 List of Organisations

Organisation

Selection: OwnOrganisation | [Show all](#)

Search for: OrganisationType: Name:

Address

Hospital

	Name	InUse	Address1	Address2	Town
	HOLYWELL SURGERY	<input checked="" type="checkbox"/>	7 BODMIN SQUARE	ELM PARK	ST IVES
	GLYN CENTRE	<input checked="" type="checkbox"/>	CWMDUAD		CARMARTHEN
	ST JOHNS MEDICAL CENTRE	<input checked="" type="checkbox"/>	86 BROOKSIDE AVENUE	PITSEA STREET	MARGATE
	81 CLEMEN	<input checked="" type="checkbox"/>	SEACROFT		MIDDLESEX
	11 SHEEN	<input checked="" type="checkbox"/>	OULTON		WEST YORKS
	18 DEBAD	<input checked="" type="checkbox"/>	1A BRYNMAWR AVE		
	11, DETHA	<input checked="" type="checkbox"/>	YEADON		
	98 CLOSE	<input checked="" type="checkbox"/>	ASHFORD		LONDON
	26 DALEACRE	<input checked="" type="checkbox"/>			ANDOVER
	21	<input checked="" type="checkbox"/>	BURLEY-IN-WHARFEDALE		LEEDS
	FA	<input checked="" type="checkbox"/>	179 POOLEY GREEN RD		LEEDS
	OU	<input checked="" type="checkbox"/>	DREFACH		MIDDX
	25	<input checked="" type="checkbox"/>	ST DOGMAELS		KENT
	BROCKWOOD HEALTH CENTR	<input checked="" type="checkbox"/>	STATION RD		SURREY
	WESTWAY MEDICAL H/CENTR	<input checked="" type="checkbox"/>	22 FOOTBALL	SHEFFIELD	LEEDS
	83 HELSTON ROAD	<input checked="" type="checkbox"/>			
	25 LULWORTH CRESCENT	<input checked="" type="checkbox"/>	DRONFIELD WOODHOUSE		WALLSEND
	16 RIVERVIEW	<input checked="" type="checkbox"/>	VICTORIA PARK SQUARE		LONDON
	THE HEALTH CENTRE	<input checked="" type="checkbox"/>	STATION RD		LEEDS
	STATION MEDI	<input checked="" type="checkbox"/>	HERMISTON		

A list of existing organisations will appear. Clicking on the Form icon beside each record will show further organisation details.

You can also click on the Form icons to edit the Organisation details.

Click here to add a new organisation.

9.19.2 New Organisation Form

Organisation - New record

OrganisationType * (Make a choice)

Name *

InUse ☒

Address **Professionals** **Wards** **Location** **Clinics** **Patient groups** **Other** **Centres**

Address1

Address2

Town

County

PostCode

Telephone

Fax

Email

OrganisationCode

HealthAuthority * (Make a choice)

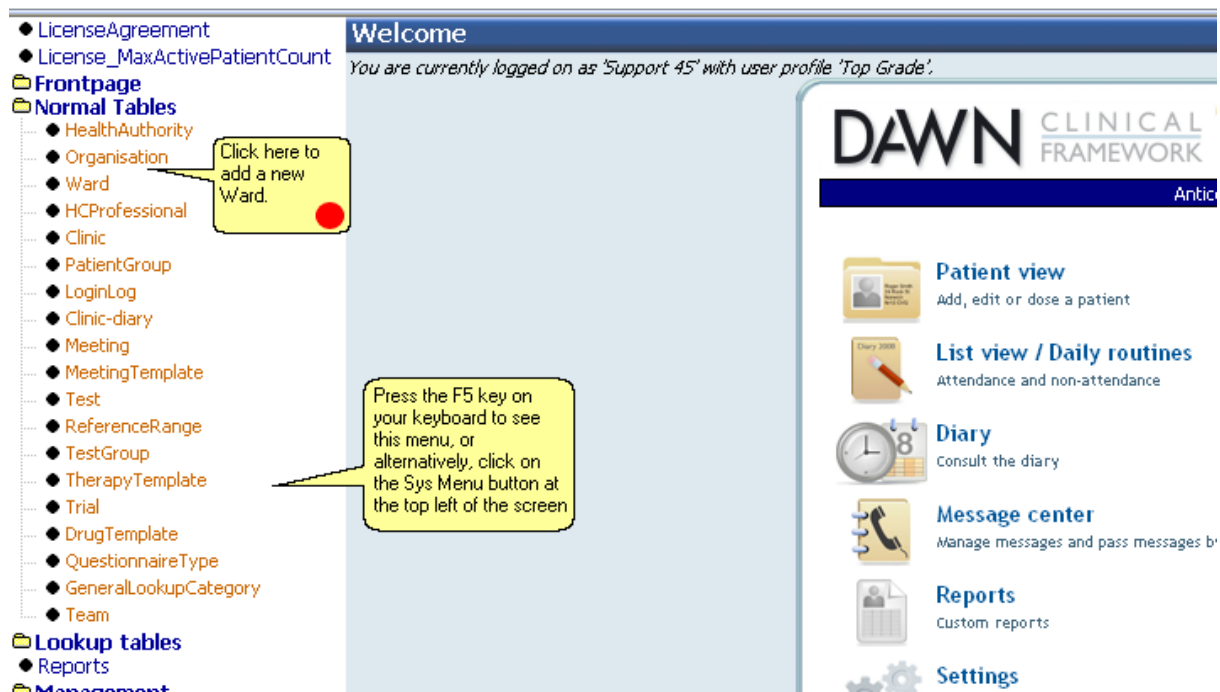
OK **Cancel** **Save**

Callouts:

- An organisation type must be chosen from the scroll down list, eg, 'hospital'.
- An organisation name can be added. This name must be unique.
- Once the record is in use, you can view which healthcare professionals, wards, clinics, etc belong to this organisation by clicking on these additional tabs.
- The InUse box must be checked to use this organisation.
- The organisation address and contact details can be added here.
- A health authority must be chosen for this organisation.
- Click here to save the record and return to the list of organisations.
- Several default Organisation Types are included in the system. If you wish to add a new organisation type, you can choose the Organisation Type table from within the Lookup Tables menu.

9.20 Adding a New Organisation Ward (Optional)

Wards can optionally be set up within the system to monitor inpatients. You must have an Organisation set up within the system before creating a new Ward.



9.20.1 List of Wards

Organisation	Description	InUse
Morrside Hospital	pig ward	<input checked="" type="checkbox"/>

You can click on the Form icon to the left of each record to view further details.

A list of existing wards will appear in a list. This list is editable.

Click here to add a new Ward.

▲ Up ▼ Down New Save Details Print

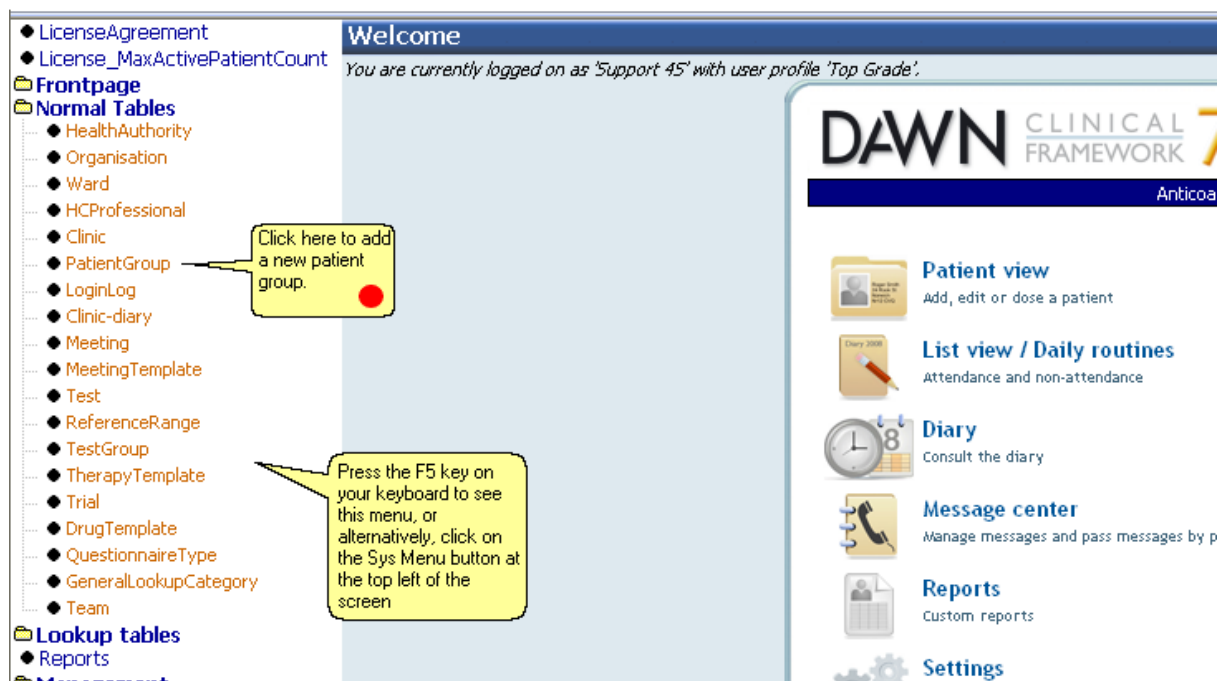
9.20.2 New Ward Form

The screenshot shows the 'New Ward Form' interface. It includes the following fields and callouts:

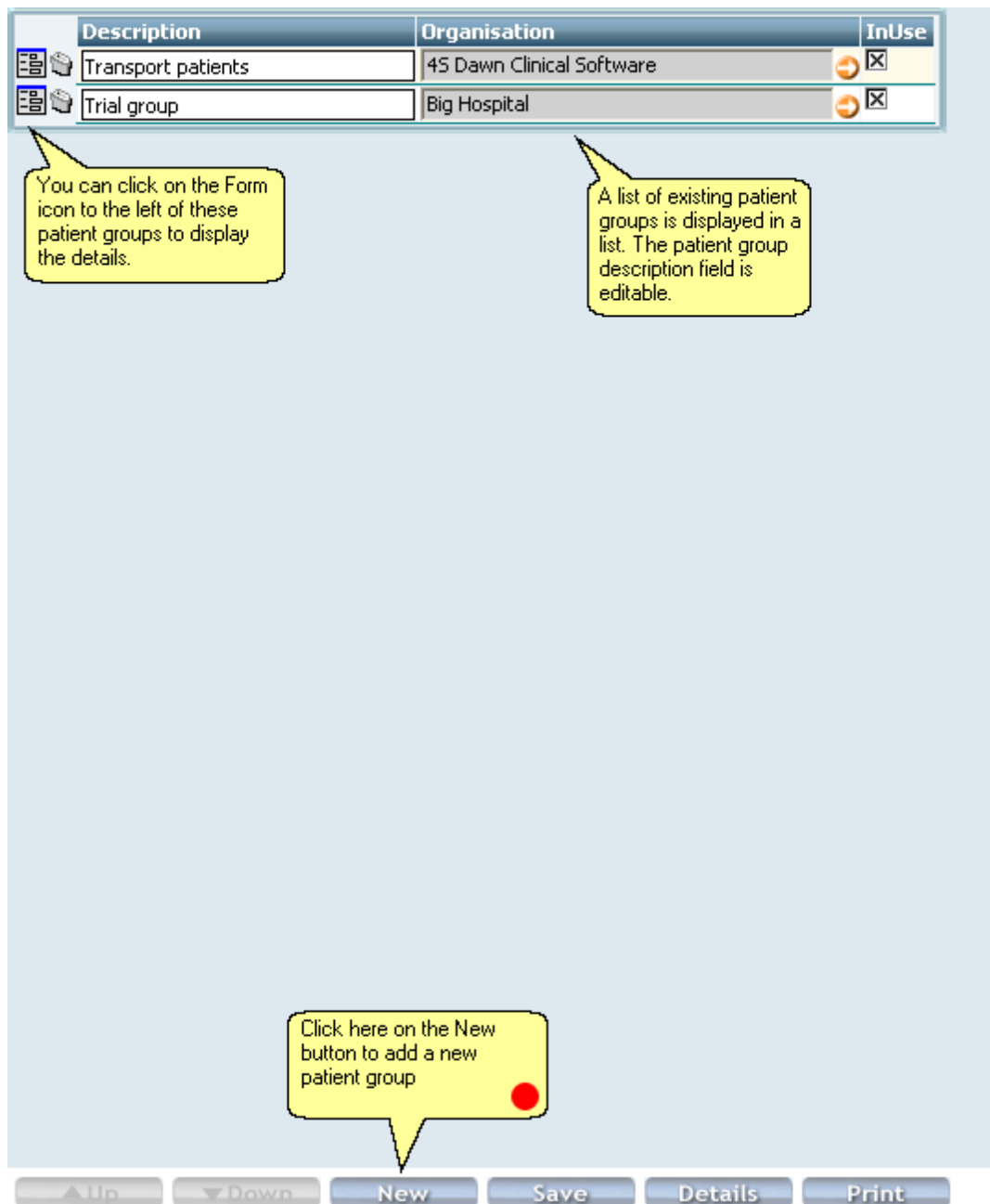
- Organisation:** A dropdown menu with the text '(Make a choice)'. A callout states: 'You need to specify an Organisation that the Ward belongs to from the scroll down list here. This field is mandatory.'
- Description:** A text input field. A callout states: 'A Ward name can be added here.'
- Treatment plans:** A text area. A callout states: 'Once the ward is in use, a list of treatment plans that include this ward will be listed in this box.'
- InUse:** A checkbox. A callout states: 'The InUse box must be checked in order to use this ward.'
- Buttons:** At the bottom are 'OK', 'Cancel', and 'Save' buttons. A callout points to the 'OK' button: 'Click here on the OK button to save this new ward and return to the list of existing wards.'

9.21 Adding a New Patient Group (Optional)

Patient groups are used to group together a subset of patients for use in reporting, list views, research purposes, etc. Patient groups are not a mandatory section to be filled in within DAWN.



9.21.1 List of Patient Groups



9.21.2 New Patient Group Form

The screenshot shows the 'New Patient Group Form' with the following fields and callouts:

- Description:** A text input field with a red asterisk indicating it is mandatory. Callout: "You can add a new Patient Group name here. This field is mandatory."
- Organisation:** A dropdown menu showing 'Big Hospital'. Callout: "The Organisation that the user is logged against will automatically be populated here."
- Members:** A large empty box for listing members. Callout: "Once this record is in use, the patients belonging to this group will be displayed in this box."
- InUse:** A checkbox that is checked. Callout: "The In Use check box must be checked in order to use this patient group."
- Buttons:** 'OK', 'Cancel', and 'Save' buttons at the bottom. Callout for the OK button: "Click here on the OK button to save this record and return to the list of patient groups."

9.22 Adding a New User profile

Several User Profiles can be configured in DAWN and applied to different Healthcare Professionals. Some users require read-only access while others will need to edit certain values in DAWN.

See also the [Personal Settings](#) on the Front screen of DAWN - each user can further modify their own access to parts of the DAWN system.



9.22.1 Viewing and Editing Existing User Profiles

Description

- Top Grade
- Middle Grade
- Lower Grade
- Patients
- Interface

A list of existing profiles appears in a list. The settings for each of these profiles are editable

Description Top Grade

Patient

AllowCreatePatient	<input checked="" type="checkbox"/>
AllowEditPatientData	Edit all
AllowChangeRiskClass	<input checked="" type="checkbox"/>
AllowEditPatientOrganisations	<input checked="" type="checkbox"/>
AllowDeactivatePatient	<input checked="" type="checkbox"/>
AllowViewPatientTelAppFields	<input type="checkbox"/> AllowEditPatientTelAppFields <input type="checkbox"/>
AllowedPatientTabSheets	<input checked="" type="checkbox"/> Contacts <input checked="" type="checkbox"/> Letters <input checked="" type="checkbox"/> Drugs <input checked="" type="checkbox"/> Events <input checked="" type="checkbox"/> Procedures <input checked="" type="checkbox"/> Reviews <input checked="" type="checkbox"/> Reminders <input checked="" type="checkbox"/> Groups <input checked="" type="checkbox"/> Documents <input checked="" type="checkbox"/> Graph <input checked="" type="checkbox"/> History <input checked="" type="checkbox"/> NextOfKin <input checked="" type="checkbox"/> Clinical <input checked="" type="checkbox"/> Owners <input checked="" type="checkbox"/> Audit <input checked="" type="checkbox"/> TreatmentPlans <input type="checkbox"/> Questionnaires <input type="checkbox"/> PatientResults

You can scroll through each of the user profiles by pressing the Arrow buttons

Click here to add a new user profile

Navigation buttons: << < > >> New Delete Save Print

9.22.2 Adding a New User Profile

UserProfile

Description

- Top Grade
- Middle Grade
- Lower Grade
- Patients
- Interface

You need to add a user profile name here.

Description Top Grade

Patient

AllowCreatePatient	<input checked="" type="checkbox"/>
AllowEditPatientData	<input checked="" type="checkbox"/> Edit all
AllowChangeRiskClass	<input checked="" type="checkbox"/>
AllowEditPatientOrganisations	<input checked="" type="checkbox"/>
AllowDeactivatePatient	<input checked="" type="checkbox"/>
AllowViewPatientTelAppFields	<input type="checkbox"/> AllowEditPatientTelAppFields <input type="checkbox"/>
AllowedPatientTabSheets	<input checked="" type="checkbox"/> Contacts <input checked="" type="checkbox"/> Letters <input checked="" type="checkbox"/> Drugs <input checked="" type="checkbox"/> Events <input checked="" type="checkbox"/> Procedures <input checked="" type="checkbox"/> Reviews <input checked="" type="checkbox"/> Reminders <input checked="" type="checkbox"/> Groups <input checked="" type="checkbox"/> Documents <input checked="" type="checkbox"/> Graph <input checked="" type="checkbox"/> History <input checked="" type="checkbox"/> NextOfKin <input checked="" type="checkbox"/> Clinical <input checked="" type="checkbox"/> Owners <input checked="" type="checkbox"/> Audit <input checked="" type="checkbox"/> TreatmentPlans

The Allow Edit Patient Data setting determines whether the user can edit all of the patient information, the contact information only, or none at all.

The patient section of the form allows you to configure permission settings such as: Is the user allowed to create a patient? Is the user allowed to edit patient data? Which tabs on the main patient screen is the user allowed to view?

AllowAdvancedPatientTabSheets	<input type="checkbox"/>
AllowDeletePatient	<input type="checkbox"/>
Treatment plan	
AllowCreateTreatmentPlan	<input checked="" type="checkbox"/>
AllowEditTreatmentPlanTestLimits	<input checked="" type="checkbox"/>
AllowActivateAndEditTreatmentPlan	<input checked="" type="checkbox"/>
AllowSuspendStopTreatmentPlan	<input checked="" type="checkbox"/>
AllowAdmitDischargeTreatmentPlan	<input checked="" type="checkbox"/>
AllowDeleteTreatmentPlan	<input checked="" type="checkbox"/>
AllowEditPatientTherapyPhase	(None selected)
Treatment	
AllowScheduleTreatment	High
AllowUnScheduleTreatment	High
AllowEnterAndAccept INR	High
AllowDNATreatment	High
AllowTestFailedTreatment	High
AllowAcceptDose	High
AllowAuthorise	High
AllowAuthoriseManual/BridgingTreatment	<input checked="" type="checkbox"/>
AllowResetTreatment	High
AllowCustomizedWeekPatterns	<input checked="" type="checkbox"/>
Visit	
AllowEditVisit	(None selected)
AllowScheduleVisit	(None selected)
AllowUnScheduleVisit	(None selected)
AllowDNAVisit	<input checked="" type="checkbox"/>
AllowCloseVisit	(None selected)
AllowDeleteVisit	<input type="checkbox"/>
Patient interventions	
AllowEditPatientIntervention	(None selected)
AllowAddPatientIntervention	(None selected)

This is the treatment plan section. You can specify here whether the user can create a treatment plan, edit the treatment plan, etc. To allow the user to carry out an action, click in the check box so that it is checked.

This is the treatment section. These fields determine which risk class of patient the user can carry out each action for. For example, if the 'schedule treatment' action is set as 'High', then the user can schedule treatment for high risk patients, as well as medium and low risk. If it is set to 'low', then the user can only carry out the action on low risk patients.

This determines which users are permitted to authorise Manual/Bridging doses. When this option is checked the user can authorise Manual/Bridging patients up to the risk class level defined by the settings above.

These settings refer to different application areas within Dawn, such as Rheumatology. If anticoagulation is the only area that is used then these settings can be left unselected. If other application areas are being used, then these settings will determine who is able to schedule and DNA a visit as well as who is able to add and edit patient results.

Access to parts of the application

AllowViewMenu	<input checked="" type="checkbox"/>
AllowReports	<input checked="" type="checkbox"/>
AllowEditReports	<input checked="" type="checkbox"/>
AllowMessageCenter	<input checked="" type="checkbox"/>
AllowClinicView	<input checked="" type="checkbox"/>
AllowClinicDiary	<input checked="" type="checkbox"/>
ShowStatisticsOnBackPage	<input checked="" type="checkbox"/>


These settings determine whether users are allowed to view certain parts of the Dawn system, such as the report and clinic-diary section.

Admin functions

AllowViewAllOrganisations	<input checked="" type="checkbox"/>
AllowUserManagement	<input checked="" type="checkbox"/>
AllowMaintainUserProfiles	<input checked="" type="checkbox"/>
AllowMaintainDosingEngineTables	<input checked="" type="checkbox"/>
AllowMaintainSystemTables	<input checked="" type="checkbox"/>
AllowMaintainMedicalLookupTables	<input checked="" type="checkbox"/>
AllowMaintainOrganisationTables	<input checked="" type="checkbox"/>
AllowSystemTools	<input checked="" type="checkbox"/>
AllowViewAuditTables	<input checked="" type="checkbox"/>
AllowMonitorScreens	<input checked="" type="checkbox"/>

The Administrator functions can be amended to determine whether the user can carry out system managers actions or not, such as amending user profile settings. The bottom checkbox also determines whether the user can see the results hold monitor.

Application Area specific permissions

ApplicationArea	AllowAccess	AllowEditTreatmentPlanMedicalData
 Anticoagulation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Users can be given certain permissions in different applications of the system here. To add a new application area, you can click on the Form icon to the top left of this box.

Once the user profile is in use, the healthcare professionals with this user profile are displayed here.

Healthcare professionals in this profile

Organisation	HCProfessionalType	LastName	FirstName	DirectTelephone
Big Hospital	IT	Support	4S	

The order number determines where the user profile will appear in a list.

The InUse box must be checked in order to use this user profile

Click here on the Save icon to save this user profile and return to the list of user profiles

Other

OrderNr:

InUse: ☒










Navigation buttons: << < > >> New Delete Save

9.23 Adding/Editing Healthcare Professional Types

If you need to add a type for a healthcare professional that does not exist in the standard list, new types can be added here.



9.23.1 List of Healthcare Professional Types

	Description	DescriptionMulti	InUse
	Consultant	Consultants	<input checked="" type="checkbox"/>
	GP	GP's	<input checked="" type="checkbox"/>
	Nurse	Nurses	<input checked="" type="checkbox"/>
	Pharmacist	Pharmacists	<input checked="" type="checkbox"/>
	BMS	BMS	<input checked="" type="checkbox"/>
	Clerk	Clerks	<input checked="" type="checkbox"/>
	Manager	Managers	<input checked="" type="checkbox"/>
	IT	IT profs	<input checked="" type="checkbox"/>
	ConsultantInCharge	ConsultantInCharge	<input checked="" type="checkbox"/>

A list of existing Healthcare Professional types appear in a list. These fields are editable.

To delete a healthcare professional type, you can click on the Bin icon to the left of the record (please note - if the healthcare professional type is logged against a healthcare professional, then it cannot be deleted)

Click here on the New button to add a new healthcare professional type

▲ Up ▼ Down New Save Print

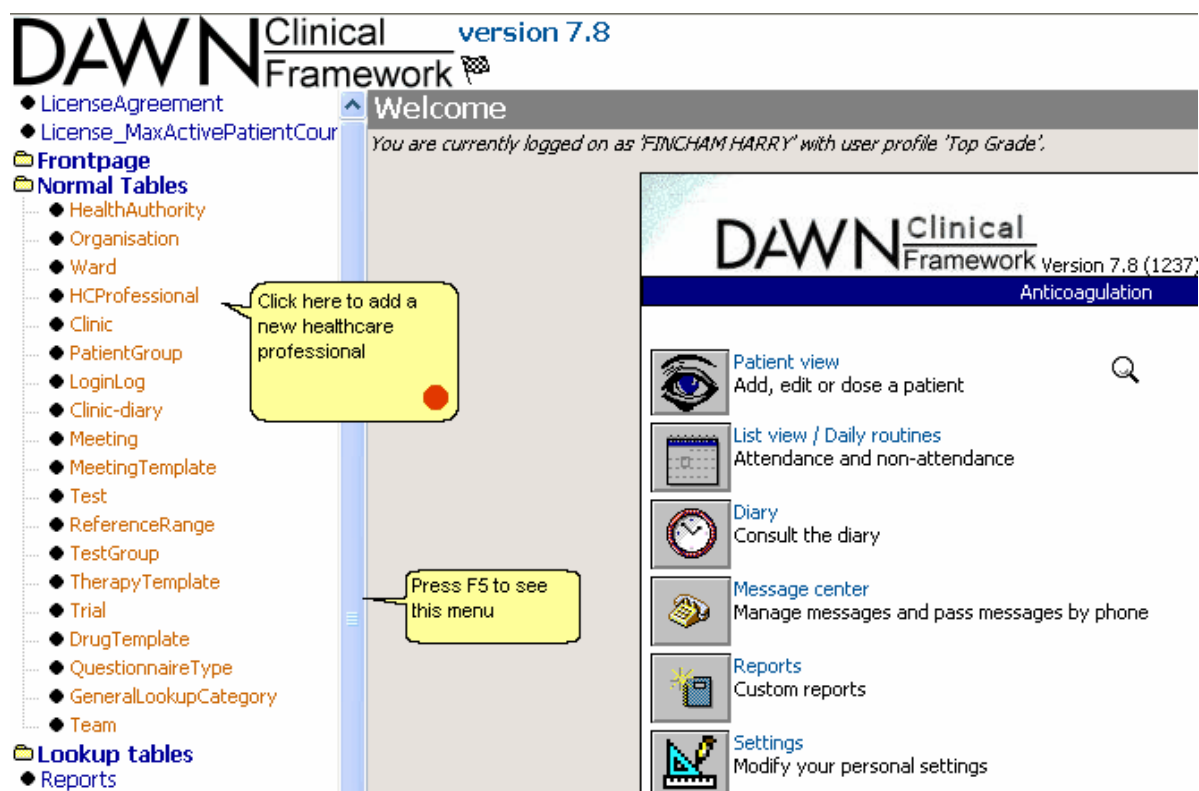
9.23.2 Adding a New Healthcare Professional Type

The screenshot shows a dialog box for adding a new healthcare professional type. It contains the following fields and controls:

- Description**: A text field with an asterisk (*) indicating it is mandatory. A callout points to it: "You can add a healthcare professional type here. This field is mandatory, and must be unique."
- DescriptionMulti**: A text field for additional details. A callout points to it: "You can add further healthcare professional details here."
- InUse**: A checkbox. A callout points to it: "The InUse box must be checked in order to use this healthcare professional type."
- Buttons**: At the bottom are three buttons: "OK", "Cancel", and "Save". A callout points to the "OK" button: "Click here on the OK button to save this record and return to the list of healthcare professional types".

9.24 Adding a New Healthcare Professional

Healthcare Professionals can be added to the DAWN system and can optionally be set up with user accounts to access their patients. Once healthcare professionals have been added to the system they can be logged as a patients referring GP, consultant, etc.



An Organisation must be created before a Healthcare Professional can be added.

9.24.1 List of Healthcare Professionals

HCPProfessional

Search for: Organisation: HCPProfessionalType:
 LastName: FirstName:

Organisation	HCPProfessionalType	
11, DETHICK COURT	GP	
11, DETHICK COURT	GP	
11, DETHICK COURT	GP	
11, DETHICK COURT	GP	MCGREAVEY, J B
11, DETHICK COURT	GP	PARSONS, F K
11, DETHICK COURT	GP	POLE, X U
11, DETHICK COURT	GP	SINNETT JONES, J T
14 IMPERIAL	GP	PERRY, V U
18 DEBADA	GP	BAKER, K U
18 DEBADA	GP	WISBEY, I Q
21 STILEMAN HOUSE	GP	GREEN, I L
21 STILEMAN HOUSE	GP	HERITAGE, V I
21 STILEMAN HOUSE	GP	HUGHES, G A
21 STILEMAN HOUSE	GP	MIAH, T D
25 ALEXANDER ROAD	GP	BAUM, P L
25 ALEXANDER ROAD	Pharmacist	HILL
25 LULWORTH CRESCENT	GP	ALI, Z B
25 LULWORTH CRESCENT	GP	BISS, T F
25 LULWORTH CRESCENT	GP	CHEETHAM, O N
25 LULWORTH CRESCENT	GP	CLARK
25 LULWORTH CRESCENT	GP	MACRAE, H W

You can optionally search for a particular record by name, organisation, HC Professional type, etc

You can view further details of each HC Professional by clicking on the Form icon beside each record.

Click here to add a new record.

9.24.2 Adding Healthcare Professional Details

HCPProfessional - New record

Organisation * (Make a choice)
HCPProfessionalType * (Make a choice)
LastName *
FirstName *
InUse ☒

[Address info](#) | [Account info](#) | [Notes](#)

Title
NationalNumber
LocalNumber
DirectTelephone
Mobile
Email
DirectFax
MessagingMethod E-mail

OK Cancel Save

You must choose an Organisation and HCPProfessionalType from the scroll down lists.

A last name and first name can be added for the HC Professional.

The InUse box must be checked in order to use this record.

The HC Professionals address and contact details can be added here.

An email address must be entered if a password account is to be set up for the HC Professional. If the HC Professional does not have an email address, use a dummy address or a generic address.

A preferred messaging method can be chosen for this HC Professional. This will determine how the HC Professional receives automatic messages sent from Dawn.

By leaving the InUse box unchecked, the Healthcare professional will not appear in any of the GP, consultant, etc lists within the system, and so the record will not be used. This can be useful if the healthcare professional is no longer active but still appears against some patient records.

Click here to save the record and move onto the Account Info tab.

Several default healthcare professional types are included within the system. If you wish to add a new healthcare professional type, you can do this by accessing the HCPprofessional type table from the Lookup Tables menu.

9.24.3 Adding Healthcare Professional Account Info

HCPProfessional

Organisation Big Hospital

HCPProfessionalType GP

LastName Smith

FirstName

Initials

InUse ☒

Address info **Teams** **Account info** **Notes**

User Paul

PasswordExpirationDate 23/06/2009

Failed login count 0

Failed login count (total) 0

Locked ☐

Last login date

Total number of logins 0

UserProfile Top Grade

NetworkName

Notes can optionally be added into the Notes tab

A user name needs to be added. This user name will be used to log into DAWN.

Click here to set a new password for the HCPProfessional

A password expiration date is populated. This ensures that the user will change their password on logging into DAWN so that this information remains confidential.

This checkbox indicates whether the account is 'locked' and therefore used or not.

A user profile needs to be specified for the hcpprofessional. This will affect which areas of DAWN the user can and cannot access/amend.

A network name can optionally be added here. This can be used when using Windows authentication type login.

The failed login count gives the total number of failed logins logged so far for the user. A user can only attempt to log in three times before being 'locked out' of the system if the user name or password is incorrect.

Navigation buttons: << < > >> New Delete

9.24.4 Adding Healthcare Professional Password

The screenshot shows the 'HCPProfessional' form with the following fields and values:

- Organisation:** Big Hospital
- HCPProfessionalType:** GP
- LastName:** Smith
- FirstName:** Paul
- Initials:**
- InUse:** ☒

Below these are tabs for 'Address info', 'Teams', 'Account info', and 'Notes'. The 'Account info' tab is active, showing:

- User:** Paul
- PasswordExpirationDate:** 22/06/2009 (with a 'Yes (Click to reset password)' link)
- Failed login count:** 0
- Failed login count (total):** 0
- Locked:** ☐
- Last login date:**
- Total number of logins:** 0
- UserProfile:** Top Grade
- NetworkName:**

A 'Microsoft Internet Explorer' dialog box is overlaid on the form, displaying a warning icon and the message: 'The password for 'Paul' has been set to 'T7yqYYfz''. Below the message is an 'OK' button.

Yellow callout boxes provide additional information:

- One points to the 'PasswordExpirationDate' field: 'A random password is generated for your new record. This can be used along with the user name to log into DAWN.'
- Another points to the 'OK' button: 'Click here on the OK button to return to the list of HC Professionals'.
- A third points to the 'User' field: 'This password can be changed by the HC Professional at the DAWN login screen.'

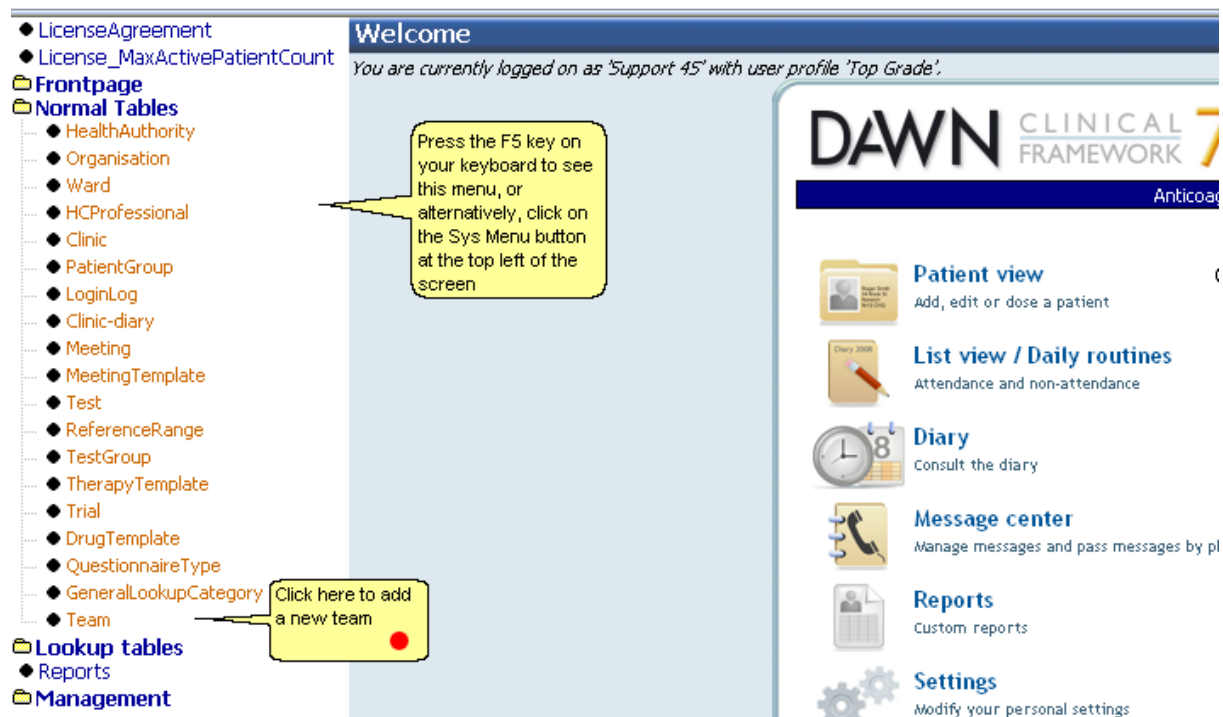
At the bottom of the form are navigation buttons: '<<', '<', '>', '>>', 'New', 'Delete', 'Save', and 'To list'.

9.25 Adding Teams

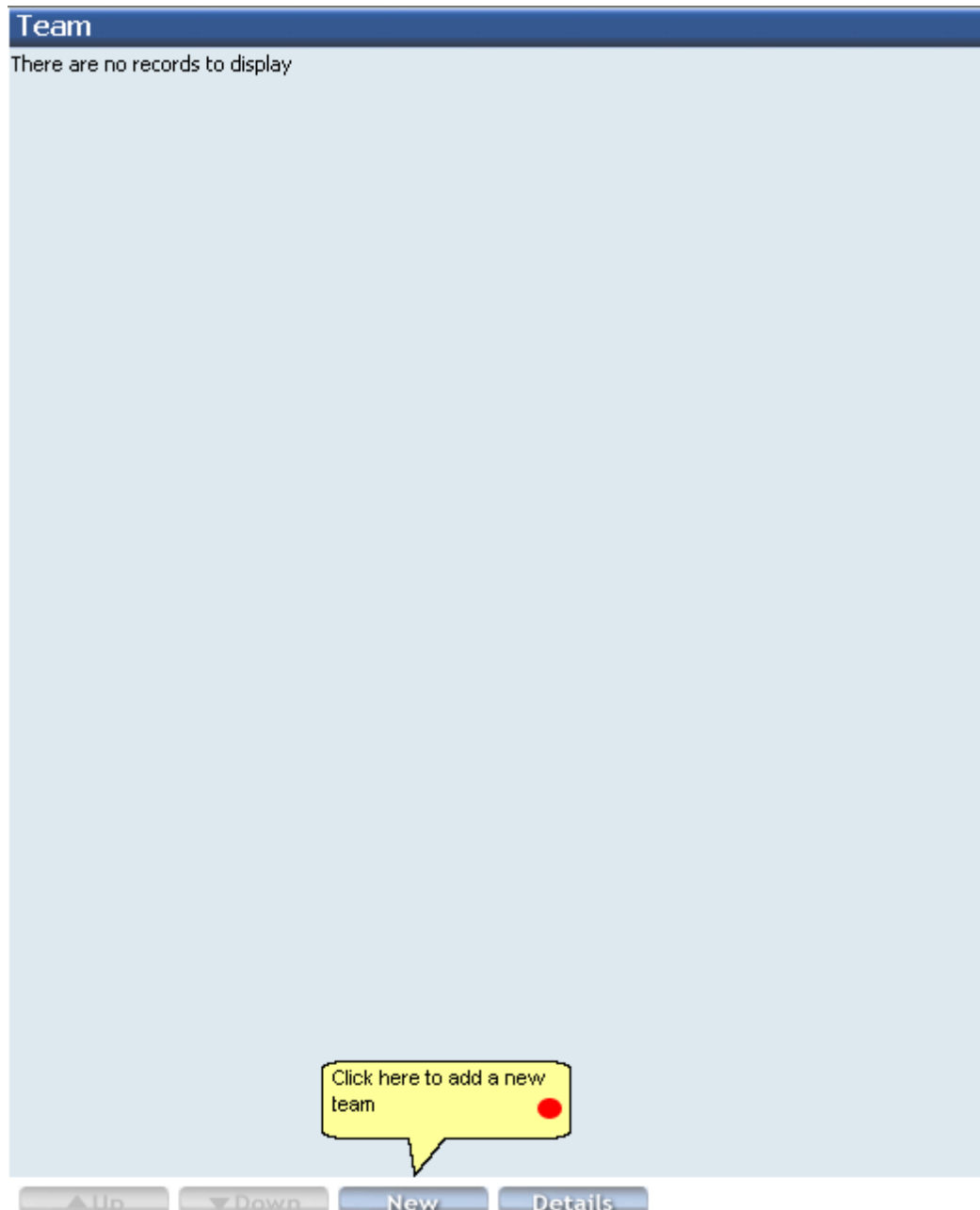
You can set up different teams within the system and assign healthcare professionals to them. One or more healthcare professionals can belong to a particular team within DAWN, eg, Rheumatology Consultants, Rheumatology Nurses. Healthcare professionals can also belong to more than one team at a time.

You can filter List Views by team if certain teams are responsible for certain groups of patients. Creating Teams also enables you to use Referrals. A Referral is a request, question or action with regard to a patient's therapy or test results, which you may raise and "refer" to another team for review, advice or as a request for some other action. Click here to learn more about Handling Referrals.

To create a new Team:



9.25.1 New Team Form



The screenshot shows a web application interface for a 'Team' form. At the top, there is a blue header bar with the word 'Team' in white. Below the header, the text 'There are no records to display' is shown in a light blue area. At the bottom of the form, there is a yellow speech bubble with the text 'Click here to add a new team' and a red dot. Below the speech bubble, there are four buttons: 'Up', 'Down', 'New', and 'Details'. The 'New' button is highlighted in blue.

9.25.2 Choosing a New Team Organisation

If your service involves several organisations, certain teams might be based at or belong to certain organisations. When you add a new team you can (optionally) select the organisation that the team belongs to.

To select an organisation either:

1. Highlight the organisation in the list
2. Press the OK button

... or simply double click the organisation in the list.

The screenshot shows a software window titled "Team - New record". Inside, there is a section titled "Please select a Organisation for the table Team". Below this is a list box containing the following items: "(None selected)", "4S Dawn Clinical Software", "Morrside Hospital", and "Big Hospital". To the right of the list box, a yellow callout bubble points to it and contains the text: "You can pick an organisation which this team belongs to." and "NOTE - although you specify an organisation here, healthcare professionals belonging to another organisation can also be added to this team". Below the list box is a search input field with a magnifying glass icon. A yellow callout bubble points to this field with the text: "You can search for a particular organisation here". At the bottom of the dialog, there are four buttons: "OK", "Cancel", "Up", and "Down". A yellow callout bubble points to the "OK" button with the text: "Click here to choose an organisation".

To create a team that does not belong to a specific organisation, click the OK button without selecting an organisation.

9.25.3 Adding a New Team

1. Enter the team name

2. Enter any notes about the team (optional)
3. Press the save button to create the new team so you can [add team members](#).

The screenshot shows the 'Team - New record' form. On the left is a sidebar with fields: Organisation (Big Hospital), Name (with a red asterisk and an empty orange box), Notes (with a cross icon and an empty text area), InUse (checked), and TeamMember. A large central text box contains the message: 'You will need to save this new record before you can add related records'. Below this is a large yellow callout box with the text: 'Once the record has been saved, healthcare professionals can be added to this new team. This can be done either from this screen, or within the Team tab on a healthcare professional record.' At the bottom left, another yellow callout box says: 'Click here to save the record and look at how this filter can be used on a list view' with a red dot. At the bottom right, a yellow callout box says: 'Team notes can optionally be added here' pointing to the Notes field. At the bottom center, a yellow callout box says: 'You need to add a team name here' pointing to the Name field. At the very bottom are three buttons: OK, Cancel, and Save.

9.25.4 Adding Team Members

Once you have created a new Team, you can add members to it at any time using the Team Member list on the Team screen.

**HINT**

It is best to add more than one team member to every team so that patient records can be dealt with when a colleague is absent.

1. Click the new record icon next to the Team Member list.

A healthcare professional selection list appears

2. Select the team member from the list and press the OK button. The new team member appears in the team list.

[Click here to learn how to use the List View Team filter](#) to find patients for specific teams.

9.25.5 List View Team Filter

List view

With Scheduled Tests

All (All patients)

(All risk classes)

(All diagnoses)

(Any target range)

All (All clinics)

(Any date)

(All roles)

(All teams)

Once new teams have been added into the system, you are able to filter patients by a particular team here

Filter With Scheduled Tests
5 records found.

Time	Name	Test Date	INR	Target	TIR	Drugs	Events	Pro
09:00	yetanother, test	09/07/2009	0.00	2.50	40%			
09:00	Pye, Delia	25/06/2009	0.00	2.50	100%			
09:00	Fielding, Nina	31/07/2009	0.00	2.50	65%			
09:00	Stellar, Steven	03/07/2009	0.00	2.50	100%			
09:00	Ferguson, Stacey	18/11/2009	0.00	2.50	100%		Yes	

Please note - if you would like to use the list views to filter on particular teams, then please contact the 4S support team who will help you to set this up

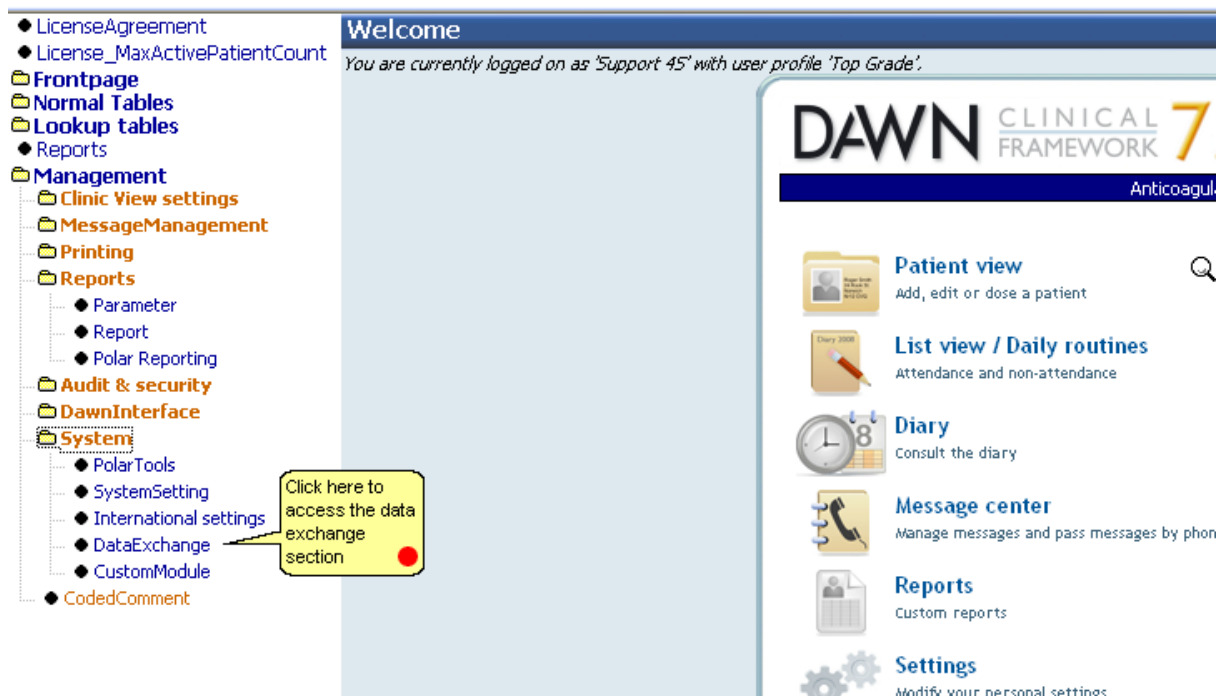
TIP - If you do not wish to include this team filter on your list views, then this can be removed by unchecking the 'Show Team Filter' box within the list view set up screen

OK Print

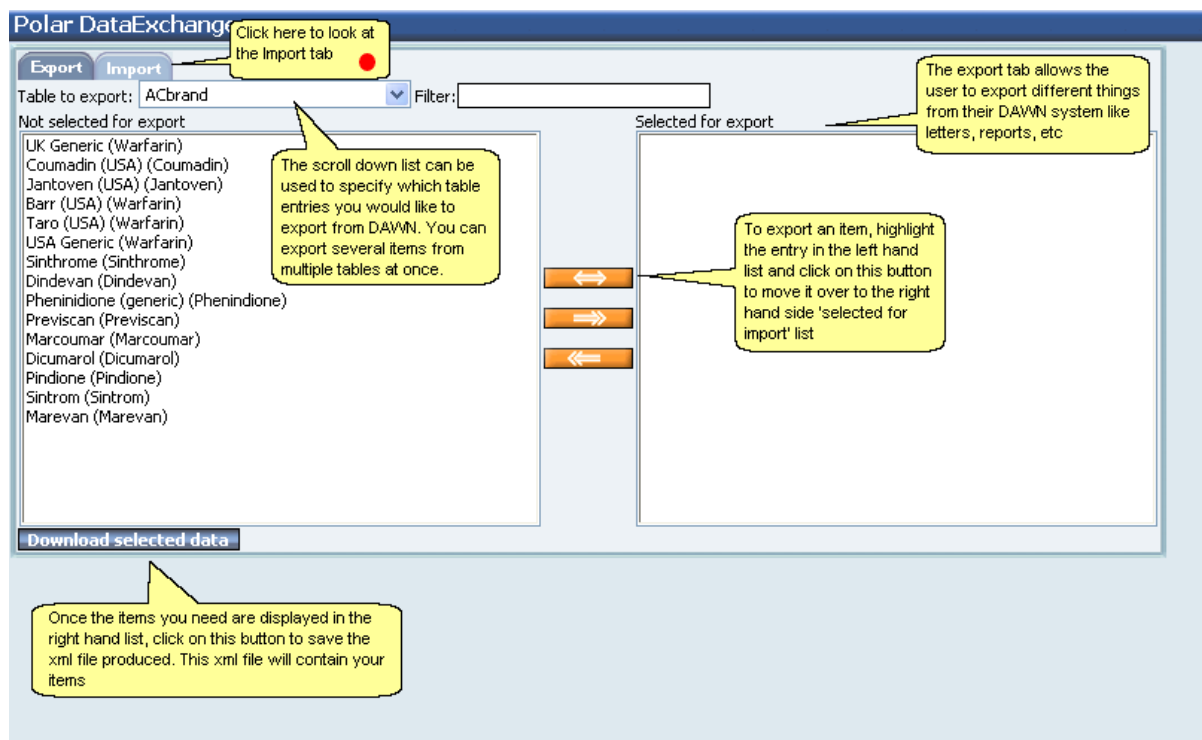
9.26 Data Exchange - to move settings

Data exchange allows users to easily import and export items such as Dosing Regimes, Message Templates, List Views, Custom Modules and Look up tables to and from their DAWN system, without needing to involve the IT department.

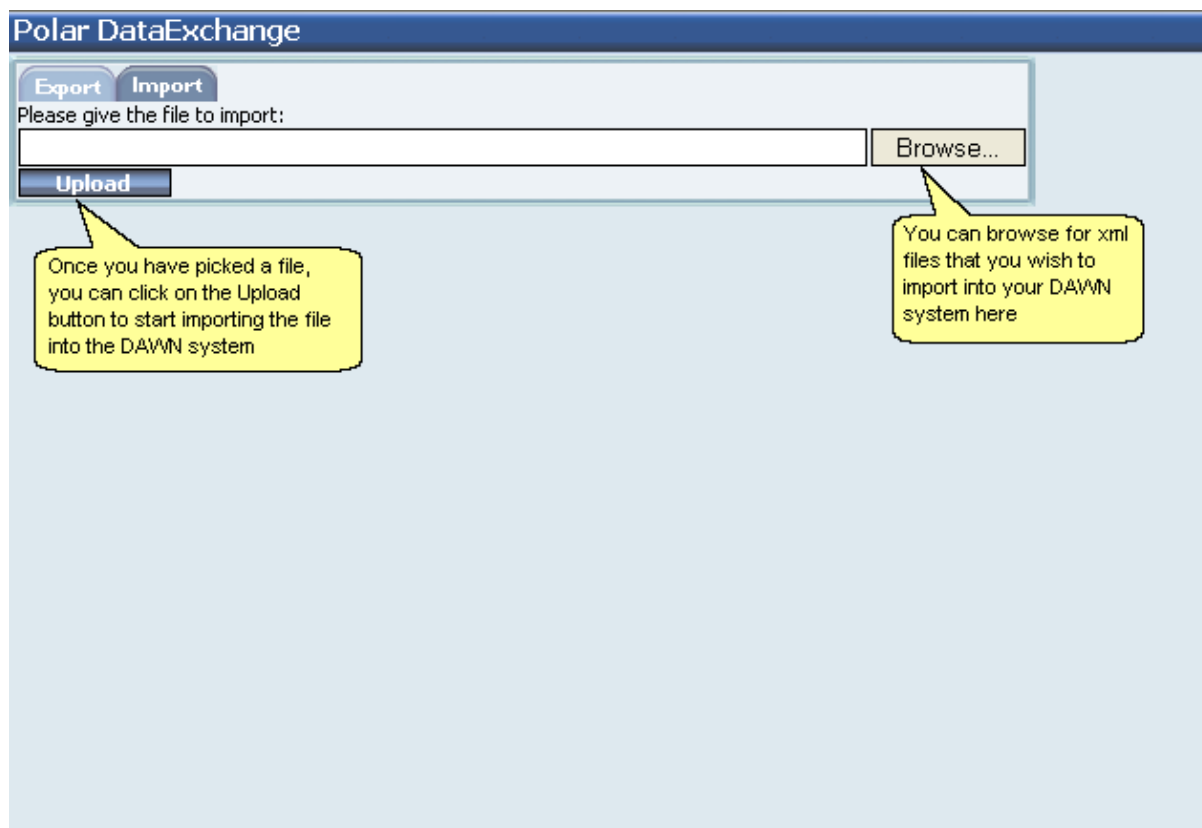
For example, the support team may create a new list view and email it to you as an XML file. You would save the file to your local machine and import it into DAWN using the Data Exchange import facility. The new list view would then be installed and ready for testing.



9.26.1 Export Screen



9.26.2 Import Screen



9.27 Setting up Printing - User Guide

If you wish to print from DAWN manually from a patient record, no setting up is required. DAWN will simply use your internet explorer page settings. You may wish to remove the header/footer and margins as required.

DAWN allows you to automate the generation of messages in response to certain events such as authorising a dose, scheduling a test or rescheduling a non attender. For example, you might configure DAWN AC to print a dosing instruction automatically when you accept a patient's dose.

Depending on certain settings and preferences, each message can be sent to a printer, faxed, emailed or forwarded to the Message Center for telephoning.

To enable automatic and bulk messaging, you must to create a Print Station in DAWN and associate this Print Station with your organization and specific locations within your organisation. When each user logs in, any messages that are triggered in response to things they do (doses they accept, non attenders they reschedule) are handled by their organisation's Print Station.

These messages are printed, faxed or emailed by a separate application called DAWNMailer, which connects to a specific Print Station and sends out all the pending messages to the right location.

Drivers for all printers at each location should be installed on the server. Should you have identical printers at different locations, the drivers would need renaming to reflect this.

Steps needed to be set up for Automatic Messaging:

1. [Setting up a Print Station](#)
2. [Setting Up DAWNMailer to process Messages for a Print Station](#)
3. [Setting up a new Paper Type](#)
4. [Mapping Printers with PrinterPaperType](#)
5. [Setting Up a New Printing Location](#)
6. [Selecting Paper Type in Message Template](#)
7. [Selecting Paper Type in Message Event](#)

9.27.1 Setting up a Print Station

- Press F5 to display the system menu and choose Management/Printing/Print Station. (If you are on DAWN version 7.0, choose Normal Tables/Print Station) to display the Print Station screen.
- Choose the orange New button to add a new Print Station.
- Enter a name, eg General Hospital

PrintStation

Name: General Hospital

Remote IP address(es):

Locked: ☐

IdentificationKey: 1641D66F8273C9D8 [Create random key](#)

Notes:

ReturnEmailAddress:

Supported organisations:

There are no items to display

Printers

There are no items to display

- Click on Create Random key to generate a unique identification key for this print station and then Save.
- Press the new item button to add the organisations that will use this print station to the Supported Organisations list.
- Leave the Printers list blank. This is automatically populated by DAWNMailer.

The PrintStation handles all Event Messages triggered by users belonging to any of its supported organisations. However, if no DAWN Mailer is running, the messages remain queued inside the print station. You need to set up the DAWNMailer to send out the messages.

9.27.2 Setting Up DawnMailer to process Messages for a Print Station

DAWNMailer is installed in the Polar Studio/Webroot folder on the DAWN server. It can be run on the server itself or it can be copied to another machine (perhaps a dedicated PC in the anticoagulation department) and run there instead.

If you intend to fax messages, DAWNMailer must reside on a computer that has a modem attached to a phone line. You must also install Microsoft Fax. Microsoft Fax is part of Windows XP and can be set up by choosing the Set Up Faxing option in Windows XP's Printers and Faxes control panel (choose Start/Printers and Faxes).

To set up DAWNMailer

1. Create a DAWNMailer folder on the PC where you intend to run DAWNMailer.
2. Copy the DAWNMailer.exe and HTMLPrinter.exe (if present) files from the Polar Studio/Webroot folder to your new DAWNMailer folder.
3. Double Click DAWNMailer to open the application. DAWNMailer attempts to start automatically. At this point you may receive an error message as DAWNMailer is not correctly configured yet.
4. Click OK to close the error message. The DAWNMailer dialog is displayed in Stopped mode. Fill in the fields as follows:

The screenshot shows the DAWNMailer configuration dialog box. It has several input fields and buttons. Callout boxes provide instructions for each field:

- Server address:** Enter the http address for Dawn AC e.g. <http://DawnServer/DawnAC> (where DawnServer is the name of your server – do not include the index.html or polarserver.asp page name)
- Use CDOSYS (recommended):** Checked checkbox
- CDOSYS SMTP server:** If you want DawnMailer to send emails enter the address of your SMTP server
- Default printer:** Select the printer you want to use by default. You can configure Dawn AC to print use different printers for different messages and different locations. This is covered in a separate factsheet
- Interval (sec.):** 5
- Interface key:** Open your Print Station in Dawn AC, highlight the Identification Key and press Ctrl + C to copy it. Click into this field and press Ctrl + V to paste in the key. This configures this copy of DawnMailer to process messages for this Print Station. If you share Dawn AC with other organisations, each organisation can have its own print station and DawnMailer.

The dialog box also includes a table for message counts and a status bar with an error message.

# messages sent			
Total	0	Printed	0
		Email	0
		Fax	0

Time of last message: -

Error: -2146697210. The system cannot locate the object specified.

Buttons: Submit, Test Mail, Test Email, Test Fax, Start

5. Press the Test Mail, Test Email and Test Fax buttons to print, email and fax a test message to ensure DAWNMailer can print, email and fax successfully.

6. Press the Start button to start DAWNMailer. DAWNMailer starts processing any messages for its corresponding Print Station.

9.27.3 Setting up a new Paper Type

- Press F5 to display the system menu and choose Management/Printing/PrinterPaperType.
- Select New.

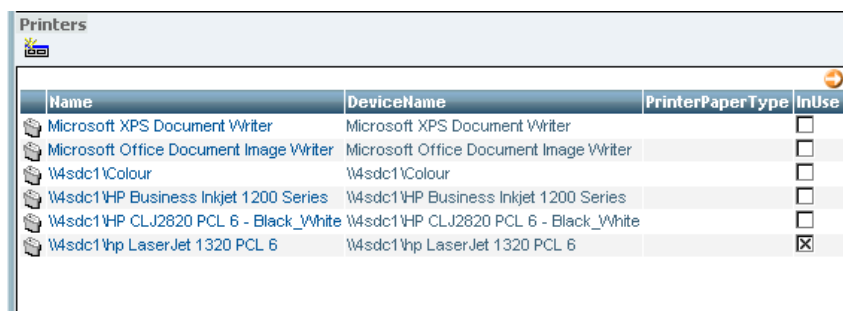
- Enter the Name of the Papertype and order you want it to display in the list.
- Choose Save.

9.27.4 Mapping Printers with PrinterPaperType

- Press F5 to display the system menu and choose Management/Printing/PrintStation.

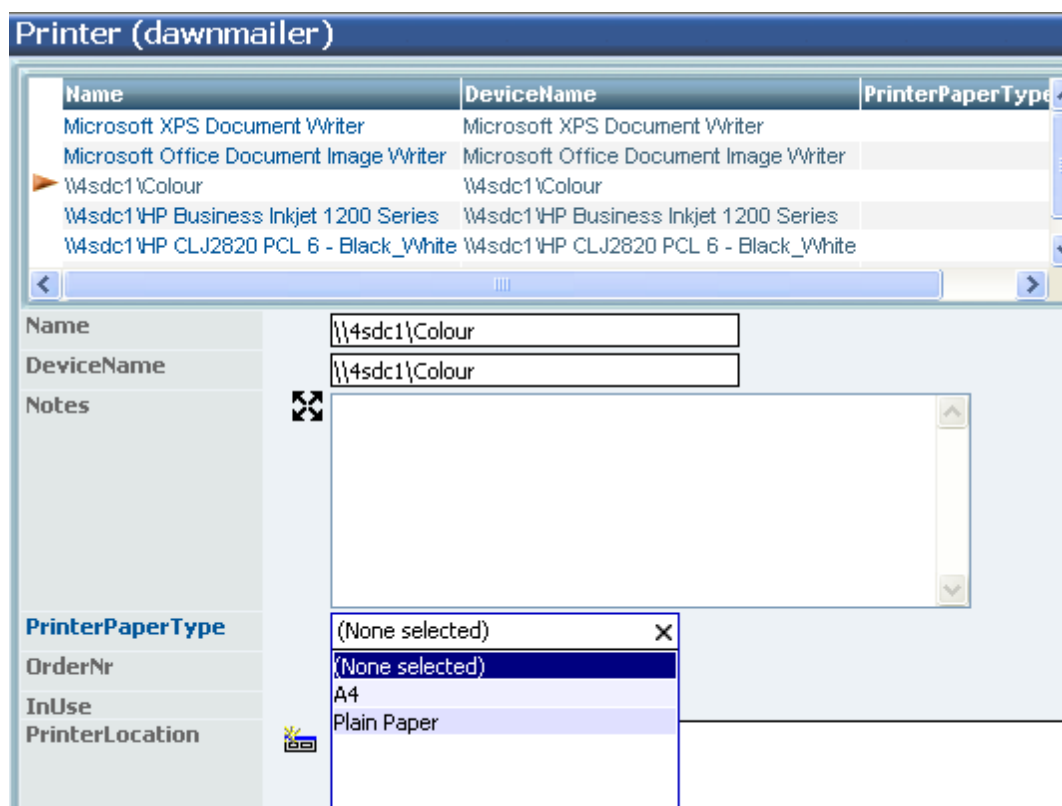
	Name	Remote IP address(es)	Locked	IdentificationKey		ReturnEmailAddress
	dawnmailer		<input type="checkbox"/>	8100443FD7E47598	Create random key	
	General Hospital		<input type="checkbox"/>	1641D66F8273C9D8	Create random key	

- Edit the PrintStation you want to map printers to PrinterPaperType for.
- Scroll down to the Printers section.



Name	DeviceName	PrinterPaperType	InUse
Microsoft XPS Document Writer	Microsoft XPS Document Writer		<input type="checkbox"/>
Microsoft Office Document Image Writer	Microsoft Office Document Image Writer		<input type="checkbox"/>
\\4sdc1\Colour	\\4sdc1\Colour		<input type="checkbox"/>
\\4sdc1\HP Business Inkjet 1200 Series	\\4sdc1\HP Business Inkjet 1200 Series		<input type="checkbox"/>
\\4sdc1\HP CLJ2820 PCL 6 - Black_White	\\4sdc1\HP CLJ2820 PCL 6 - Black_White		<input type="checkbox"/>
\\4sdc1\hp LaserJet 1320 PCL 6	\\4sdc1\hp LaserJet 1320 PCL 6		<input checked="" type="checkbox"/>

- Select a printer from the list of printers in print station interface. This will display the interface used to map a printer with printer paper type.



Name	DeviceName	PrinterPaperType
Microsoft XPS Document Writer	Microsoft XPS Document Writer	
Microsoft Office Document Image Writer	Microsoft Office Document Image Writer	
\\4sdc1\Colour	\\4sdc1\Colour	
\\4sdc1\HP Business Inkjet 1200 Series	\\4sdc1\HP Business Inkjet 1200 Series	
\\4sdc1\HP CLJ2820 PCL 6 - Black_White	\\4sdc1\HP CLJ2820 PCL 6 - Black_White	

Name	\\4sdc1\Colour
DeviceName	\\4sdc1\Colour
Notes	
PrinterPaperType	(None selected)
OrderNr	
InUse	
PrinterLocation	

PrinterPaperType dropdown options: (None selected), A4, Plain Paper

- Select the PaperType from the drop down list.
- Choose Save.

9.27.5 Setting Up a New Printing Location



- In DAWN, press the F5 key to display the menu on the left of the screen. Select
- Normal Tables/Organisation. Then select or search for the required Organisation. And click on the "View Details" icon:

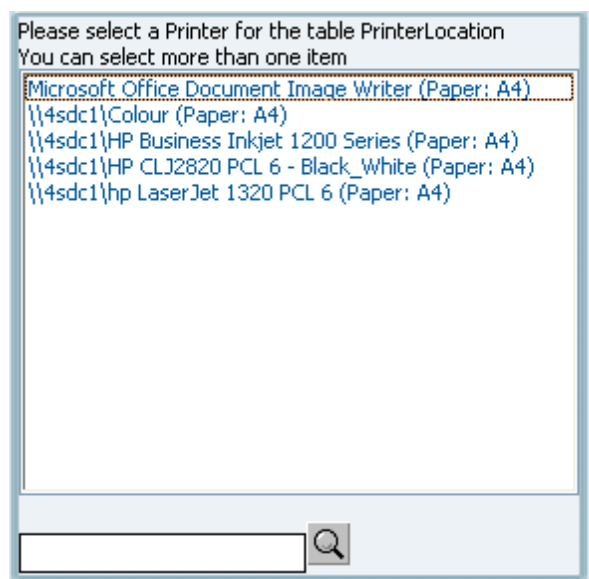


- On the Organisation details screen select the “Location” tab.

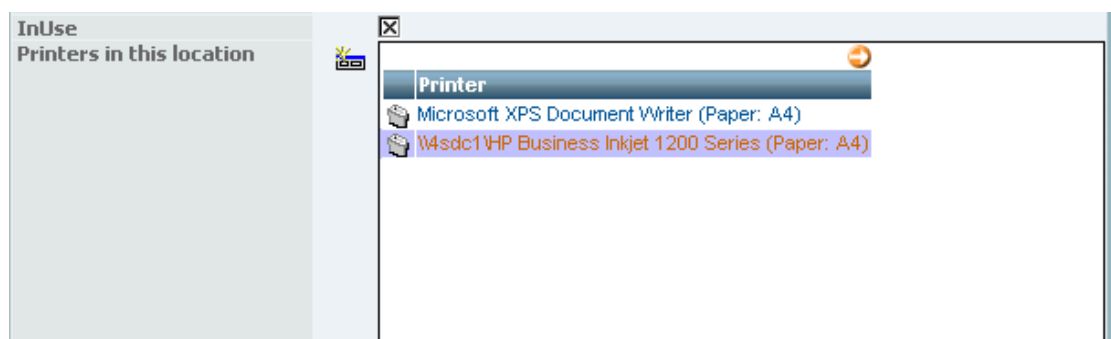
The screenshot shows the 'Organisation' details screen with the 'Location' tab selected. The top section contains fields for 'OrganisationType' (set to 'Laboratory'), 'Name' (set to 'Big Hospital'), and 'InUse' (checked). Below these are tabs for 'Address', 'Health care professionals', 'Wards', 'Location', 'Clinics', 'Patient groups', 'Print station', and 'TestCentres'. The 'Location' tab is active, displaying a table with two columns: 'Name' and 'Notes'. The table lists three locations: 'Lab room', 'Nurse Station', and 'Reception', each preceded by a printer icon. An 'Insert A Record' icon (a small yellow star) is visible in the top right corner of the table area.

Name	Notes
Lab room	
Nurse Station	
Reception	

- Click on the “Insert A Record” icon  to display the New Record screen.
- Enter a name for the new printing location and click OK. The Organisation “Location” tab will be displayed again.
- Click on the name of the new location to re-display its details.
- Click on the “Insert A Record” icon  next to the “Printers in this location” field to display a list of available printers:



- Select the required printer and click OK (or select multiple printers by holding down the shift key while clicking) to return to the printing location screen.



- Select save and the printing location will now be available to all users within the selected Organisation.
- Users can change their printing location from a drop down list on the main DAWN screen.

DAWN CLINICAL FRAMEWORK 7.9 Mon 29/06/2009
Version 7.9 (1245)

Anticoagulation

 **Patient view**
Add, edit or dose a patient

 **List view / Daily routines**
Attendance and non-attendance

 **Diary**
Consult the diary

 **Message center**
Manage messages and pass messages by phone

 **Reports**
Custom reports

 **Settings**
Modify your personal settings



Current location for printing Select a location ▼

Category	Induction	Maintenance	Explanation
No. of Active Patients	1		8 Patients on Treatment Now
Missed Test	0		1 Needs rescheduling
No next test date			2 Needs scheduling
No. INP today	0		0 awaiting result / not to attend

- The selected printing location is automatically saved, there is no need to reselect the printing location each time the user logs in.

9.27.6 Selecting Paper Type in Message Template


- Press F5 to display the system menu and choose Management/Printing/MessageManagement/MessageTemplate
- Select the PrinterPaperType for the message. This will ensure that the selected printer will use the correct printer paper type when printing this message template.
- Choose Save.

MessageTemplate

record 1 - 50 / 107

Name	PrinterPaperType	InUse
[**Part**] Site Specific Style Settings		<input type="checkbox"/>
Frenchay Dose Letter		<input checked="" type="checkbox"/>
[**cPart**] Full next test day name and date		<input checked="" type="checkbox"/>
[**cPart**] First 2 lines of current dose		<input checked="" type="checkbox"/>
[**cPart**] dose change flag		<input checked="" type="checkbox"/>
[**Part**] HTML Style Sheet - compact		<input type="checkbox"/>

Name: [**Part**] Site Specific Style Settings

Notes: 

PrintablePatientMessage: ☐

MailMergeType: Patient

DescriptionTemplate:

Template (HTML) Preview Used in events

PrinterPaperType: (None selected) X

(None selected)

A4

Plain Paper





DIV {margin-left: 15mm}
 .pagetable {width: 183mm;height: 237mm;margin:
 .lefttable {width:81mm}
 .righttable {width: 101mm}
 .address {padding-left: 8mm;height: 74mm;vertic
 .hosno {height: 7mm;vertical-align: center;font-f
 .nhsno {height: 5mm;vertical-align: center;font-f
 .lastname {height: 5mm;vertical-align: center;font
 .firstname {height: 5mm;vertical-align: center;font
 .dob {height: 11mm;vertical-align: top;font-family
 .historycomment {height: 4mm;vertical-align: cen
 .titleheight {height:10mm;vertical-align: center;fo
 .Date {width: 10mm;font-family: "arial", "helvetic
 .INR {width: 8mm;font-family: "arial", "helvetica",
 "helvetica",sans-serif;font-size: 12pt}
 ont-size: 12pt}
 ont-size: 10pt}
 if;font-size: 12pt}
 if;font-size: 12pt}
 size: 12pt}
 ans-serif;font-size: 8pt}
 erif;font-size: 8pt}
 align: bottom}
 n: bottom}

9.27.7 Selecting Paper Type in Message Event

This will supersede the settings applied for PrinterPaperType in the message template.

- Press F5 to display the system menu and choose Management/Printing/MessageManagement/MessageEvent
- Edit the message event you are setting the PaperType for.

MessageEvent

	Caption	EventType	Template	Patient message
	Dose Letter	Patient_ManualMessage	Dose Letter	Written
	DNA Letter	Patient_ManualMessage	DNA Letter	Written
	DNA Discharge letter	TreatmentPlan_OnPatientIsNonAttending	DNA Letter	Written
	Manual Dose Print	Patient_ManualMessage	Dose Letter	By phone

- Select the PrinterPaperType for the message event. This will ensure that the selected printer will use the correct printer paper type when generating this message event.

InUse	(None selected)
PrinterPaperType	A4
	Plain Paper

- Choose Save.

9.28 FAQ - settings on DAWN

How do I change the GP for my patient?

Click on Treatment plan and Referral to select a different GP. Interfacing to DAWN may be installed to make this update automatically.

Altincum Tim a12 45 67 4 The Square

Risk class	High	
Pref. clinic	County Clinic (Royal Denby)	
Phone	015395 63091 - home	
Age		
Diagnosis		
Start date	17/02/2010 - Indefinite	
Therapy	Rheumatology - Gold monitoring 2-weekly	
Ref. Range	TEST ▼	
Treatment Plan	1 ► of 1 active	
Risks		

Status active **stop** **Admit**

Test Limits Phases Visits **Referral** Transport Admission Notes History Audit

Date of referral

Referring GP 1234 - Archibold Jeremy ▼

Consultant (None selected) ▼

How do I update DAWN when a GP's address changes?

Ask your database administrator to use the System menu, Normal tables, Organisation screen to edit the address of the surgery.

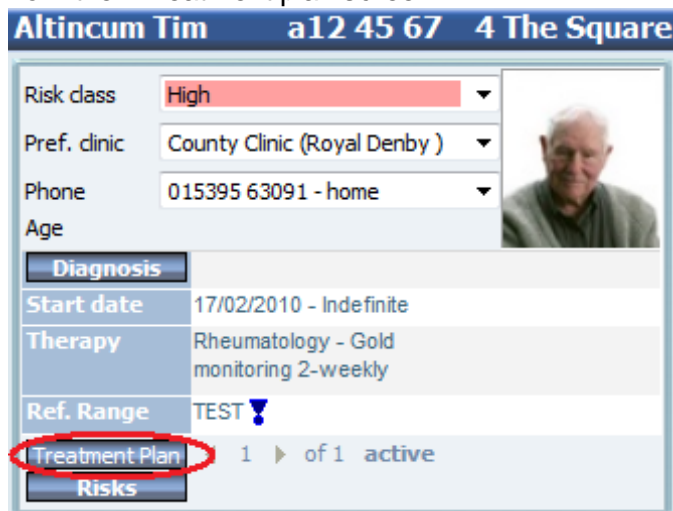
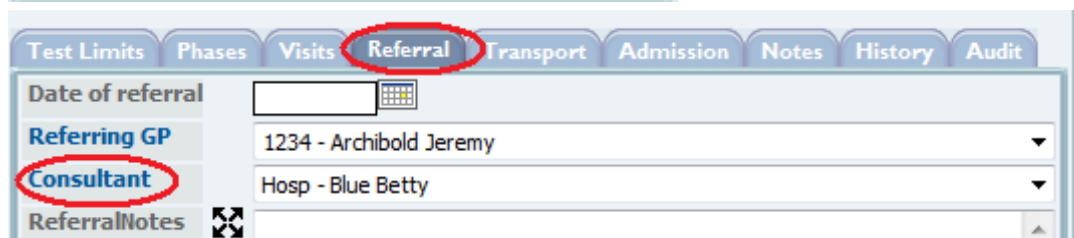


How do I update DAWN when a GP moves to a different surgery?

Ask your database administrator to use the System menu, Normal tables, HCPProfessional screen to select a different surgery for this GP.

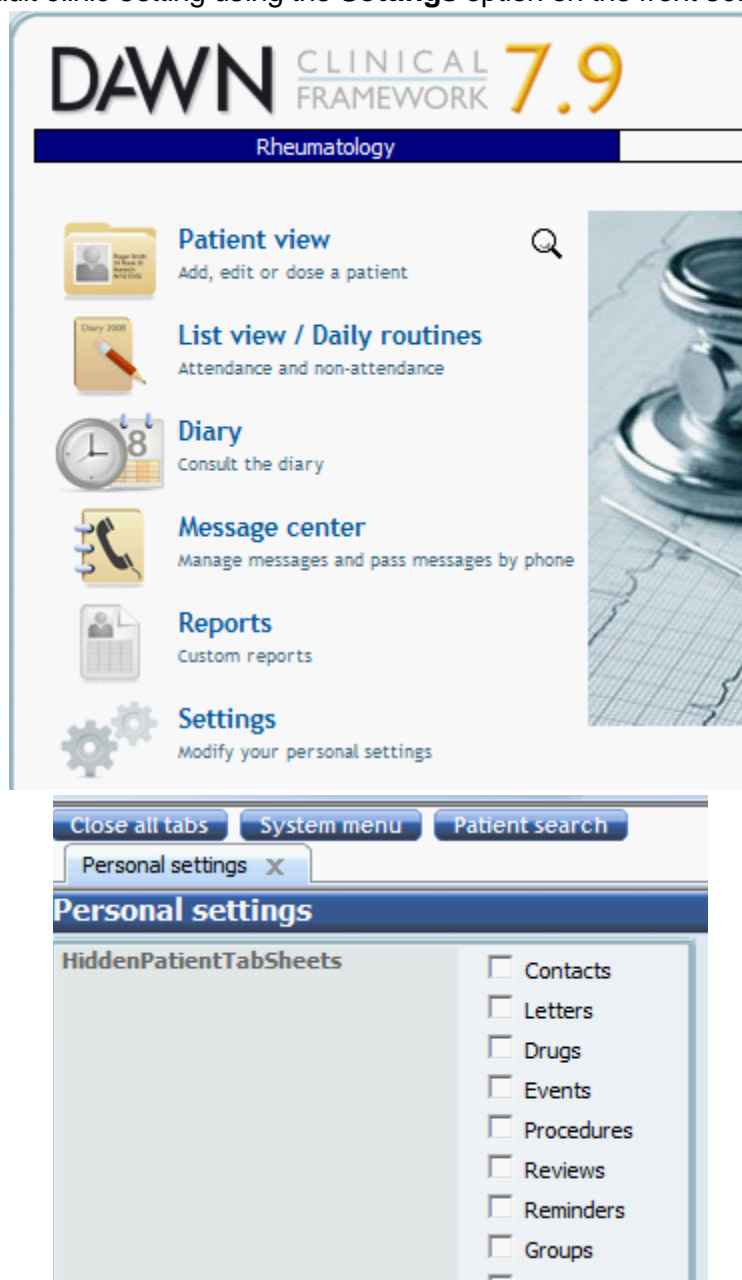
How do I update DAWN when a consultant retires?

Ask your database administrator to use the System menu, Normal tables, HCPProfessional screen to mark this consultant as not 'In use'. Transfer each patient to another consultant from their Treatment plan screen

How do I select the same Clinic every time?

Choose your default clinic setting using the **Settings** option on the front screen.



Click on the yellow star to add the default clinic

The screenshot shows a settings window with a list of options on the left and a right-hand panel with corresponding controls. The options on the left are: InitialPatientTabSheet, SuppressSentMessagesNotifications, SuppressTreatmentWarnings, LocalSettings_PatientHeight, LocalSettings_PatientWeight, EnableCustomizedWeekPatterns, and Default Clinics per ApplicationArea. The right-hand panel has a 'PatientResults' section with a 'History' dropdown, two checkboxes for 'SuppressSentMessagesNotifications' and 'SuppressTreatmentWarnings', a 'Metric' dropdown, a 'Metric (Kilo)' dropdown, and a checked checkbox for 'EnableCustomizedWeekPatterns'. Below these is a table titled 'Default Clinics per ApplicationArea' with columns 'Disease area' and 'Clinic'. The table contains one row: 'Rheumatology' and 'Default Clinic (Big Hospital)'.

Disease area	Clinic
Rheumatology	Default Clinic (Big Hospital)

This will save you a step every time you add a treatment plan.

Part



X

10 Adding a New Patient

There are several steps needed to add a new patient into the system. We go through these in order below.

Ensure you log into the correct area of DAWN by choosing the disease area (like Anticoagulation / Haematology /...) on this front screen before clicking on 'Patient View'.



Search for your patient as they may have a record in DAWN already.

Selection: Active patients | Patients with active Treatment Plans for selected app.area | Show all

Search for: Last name: First name: Hosp No:

Town: County: Postcode:

Date of birth: DoD: Language:

Home phone: Mobile phone: Work phone:

Next of kin name: Next of kin Mob. phone:

There are no records found that match your criteria

If your patient has no record on DAWN, select 'New' at the bottom of the screen to add a new record.



[\(back to Starting a Non-VKA Treatment Plan page\)](#)

10.1 Choosing New Patient Form

Patient

Selection: Active patients | Patients with active Treatment Plans for selected a

Search for: LastName: FirstName:
 UnitNo: National No:
 Dateofbirth: Status:

Personal
Contact info

You can search for a particular patient by entering data into the appropriate fields and clicking on the Search button. The list below shortens to show the hits.

You can use wildcards in your search -
 * means any set of characters
 ? means a single character, eg, 'S'

	LastName	FirstName	Age	Unit	Date of Birth	Address1	Address2	Town	County
[-]	Stevenson	Lisa	87	54657565	01/01/1922	1801 Paremill Rd	Bransty	Reading	PA
[-]	Ferguson	Stacey	16	2345345345 1234567	05/06/1993	12 Earls Court	breansty	Reading	PA
[-]	Pearson	Paul	14	213344	01/01/1995	12 Chatworth Road		West Reading	PA
[-]	Fielding	Nina	64	6785674	23/05/1945				PA
[-]	Stellar	Steven	70	457456	01/01/1939				
[-]	Pye	Delia	66	2344	11/01/1939				
[-]	yetanother	test	43	464646 533212	01/01/1939	burnt houses	high road	bransty	cumbria
[-]	Induction	Patient		375					
[-]	Stevenson	Lisa	87	46786478	01/01/1939				
[-]	Pye	Delia	66	76543	11/01/1939				
[-]	induction	test		yr5757575					
[-]	tir	test		98798797					
[-]	Henley	Jason		3457567					
[-]	interval	test		4567568					

A list of existing patients will appear with some details

Click here to add a new patient


Navigation: Up Down New Save Details Print

[\(back to detailed Non-VKA workflow page\)](#)

10.1.1 New Patient Wizard Screen

New Patient Wizard - New record

Step 1 - Patient Details | Step 2 - Treatment Plan Details | Step 3 - Next Of Kin Details | Step 4 - Clinical Details | Step 5 - Contact Details

Last name *  Ethnic origin (None selected)

First name * Primary language (None selected)

Sex (None selected) Home phone

Title Mobile phone

Date of birth Age Work phone

Hospital Number Fax number

National No Email address


Address 1 Messaging method Mail

Address 2 Risk class High

Town

County

Postcode

Notes 

Telephone numbers **Email addresses**

You will need to save this new record before you can add related records

All mandatory fields on this form are shaded. The mandatory fields must be filled in before finishing the wizard or moving onto the next step.

Mandatory fields are only contained in the patient and treatment plan tabs. Once these are filled in, the patient wizard can be finished at any point.

< Previous step | **Finish** | Cancel | Next step >

Inserted on 24/11/2009 17:11 by BANK ROAD HEALTH CENTRE - Vitching George. Last change made on 24/11/2009 17:11

If the Finish option is chosen at this point without having entered any treatment plan details, and a DAWN system setting specifies that the treatment plan is active by default, the system will say that you need to enter the mandatory treatment plan information before finishing.

If the Finish option is chosen and a DAWN system setting specifies that the treatment plan is undecided by default, a screen will appear asking whether you wish to enter the information later or move onto the treatment plan. If the finish option is chosen without having entered any treatment plan information, the patient wizard will appear the next time you search for this patient.

You can click on the Cancel option if you wish to discard these new patient details.

Click here to move onto the next step and start adding treatment plan details.

OK Cancel Save

[\(back to detailed Non-VKA workflow page\)](#)

10.1.2 Wizard Screen - Entering Treatment Plan

Step 1 - Patient Details **Step 2 - Treatment Plan Details** Step 3 - Next Of Kin Details Step 4 - Clinical Details Step 5 - Contact Details

Disease area
Anticoagulation

Primary diagnosis
(None selected)

AC Therapy
☐ Induction
☒ Maintenance
☐ Manual/Bridging

Target range
(None selected)

Regime
(None selected)

Induction algorithm
(None selected)

Start date
54/09/2012

Duration type
(None selected)

Duration
 Weeks Days

First seen date

Preferred clinic
(None selected)

Preferred time
From To

Next test date

Laboratory
(None selected)

Referral
Date of referral

(None selected)

(None selected)

Notes
Select 'Non-VKA' for the target range and leave the regime blank.
Select 'Decide later' below and activate the treatment plan with full details later.

Transport
Transport needs (None selected)

Notes

☒

DoseChange
 20 42

☒ Set the status of the TreatmentPlan to Active (Requires a Diagnosis, TargetRange, Regime, StartDate and DoseChange)
☐ Set the status of the TreatmentPlan to Admitted
☐ Set the status of the TreatmentPlan to Active Admitted (Requires a Diagnosis, TargetRange, Regime, StartDate and DoseChange)
☐ Decide later

Navigation: < Previous step Finish Cancel Next step >

See suggested [steps to monitoring non-VKA patients](#) on DAWN for some hints and tips.

10.1.3 Wizard Screen - Next of Kin Details

New Patient Wizard

Step 1 - Patient Details Step 2 - Treatment Plan Details **Step 3 - Next Of Kin Details** Step 4 - Clinical Details Step 5 - Contact Details

Name

Address

Home phone

Mobile phone

Work phone

Fax number

Email address

Messaging method (None selected)

Next of kin details can optionally be added here.

Click here if you wish to move to a previous step in the new patient wizard.

You can click finish here if you do not wish to add any clinical or contact details

Click here to move onto the next step and start adding clinical details

< Previous step Finish Cancel Next step >

Inserted on 25/11/2009 15:17 by BANK ROAD HEALTH CENTRE - Kitching George. Last change made on 25/11/2009 15:32

10.1.4 Wizard Screen - Clinical Details

New Patient Wizard

Step 1 - Patient Details Step 2 - Treatment Plan Details Step 3 - Next Of Kin Details **Step 4 - Clinical Details** Step 5 - Contact Details

Additional diagnoses There are no items to display
Additional diagnoses (besides the primary diagnosis you added in the treatment plan step) can be added here

Allergies There are no items to display
Any patient allergies can be added here

Risks There are no items to display
Any patient risks can be added here. If you add risks in this box, then they will also appear in red on the top left section of the main patient screen.

Blood group (None selected)

High risk ☐

Weight kg Measured at

Height m Measured at

BMI

BSA

A patient's blood group, weight and height can optionally be specified here

Click here if you wish to move to a previous step in the new patient wizard.

You can click finish here if you do not wish to add any contact details

Click here to move onto the next step and start adding contact details

< Previous step Finish Cancel Next step >

[\(back to Haemorrhagic Risks page\)](#)

10.1.5 Wizard Screen - Contact Details

New Patient Wizard

Step 1 - Patient Details Step 2 - Treatment Plan Details Step 3 - Next Of Kin Details Step 4 - Clinical Details **Step 5 - Contact Details**

Referring GP 11, DETHICK COURT - BISS, T F
 Consultant 18 DEBADALE HOUSE - BAKER, K U
 Team members

There are no items to display

Treatment plan team members can be chosen here. These are healthcare professionals attached to the patient, ie, district nurses, care home managers, etc. These are then logged within the patient's treatment plan, and optionally messages can be sent to these HCPprofessionals, eg, letters, faxes, etc.

If a GP and consultant have been chosen in the treatment plan step, then these will be displayed here

Click here to return to a previous step in the new patient wizard.

Click here to finish the new patient wizard and go to the main patient screen.

< Previous step Finish Cancel Next step >

Inserted on 25/11/2009 15:17 by BANK ROAD HEALTH CENTRE - Kitching George. Last change made on 25/11/2009 15:45

10.1.6 New Patient Screen

List view Patient X

Watters, Wilma - 04/09/1912 - 33243434 - 4 The Square

Risk class: Low
 Pref. clinic: (None selected)
 Phone: - home
 Age: 100

Diagnosis: Atrial fibrillation nonvalvular
Target Range: Non-VKA
Start date: 04/09/2012
Anticoagulant:
Treatment Plan: 1 of 1 New
Risks

Dosing **Contacts** **Letters** **Drugs** **Events** **Procedures**


Personal **Treatment plans** **Questionnaires** **Test Results**

There are no items in this list.

St Elsewhere - Support Dawn 04/09/2012 14:08
 Referring GP updated to St Elsewhere - Support Dawn

2. Click on the Treatment Plan link here and then click on the Activate button to activate.

1. add an Initiation Questionnaire

1. This therapy is managed using Questionnaires.
 To schedule a questionnaire:
 1. Press the  button on the Questionnaires
 2. Set the status to "Scheduled".
 3. Set the due date as appropriate.

[\(back to Workflows in DAWN page\)](#)

10.2 Adding notes

Sprout, Russell - 12/04/1951 - 3423434

Risk class: High

Pref. clinic: (None selected)

Phone: - home

Age: 61

Diagnosis

Target Range: Non-VKA

Start date: 04/09/2012 -

Anticoagulant:

Treatment Plan: 1 of 1 New

Risks

St Elsewhere - Support Dawn 04/09/2012 15:43

type the note here

click on the yellow start to add a new 'quick note'

click on the grey bar to edit a previous quick note

The Quick Notes are ideal for brief notes about a phone call or recent history of the patient.

QuickNote (Sprout Russell (12/04/1951)) - New record

HCPProfessional	St Elsewhere - Support Dawn
Date	04/09/2012 15:43
Notes	<div> <div>type the note here</div> <div> <p>coded comments can be used here - type .a to expand to the setting for your coded comment 'a'</p> </div> </div>

10.3 Drug doses

From the main patient screen, choose the Drugs tab and choose from one of the lists of drugs.

May Flora 11/11/1944 454563 4 The Square Bolton-le-Sands,

Risk class	Unclassified	Interventions	Letters	Drugs	Events	Procedures	Reviews	Reminders
Pref. clinic	Tuesday Clinic 1 (Outpatient S	Add Application-area specific drug Add drug from any application-area						
Phone	- home	There are no items to display						
Trt. plan	RH: 13/11/2008 active							
Age	64							

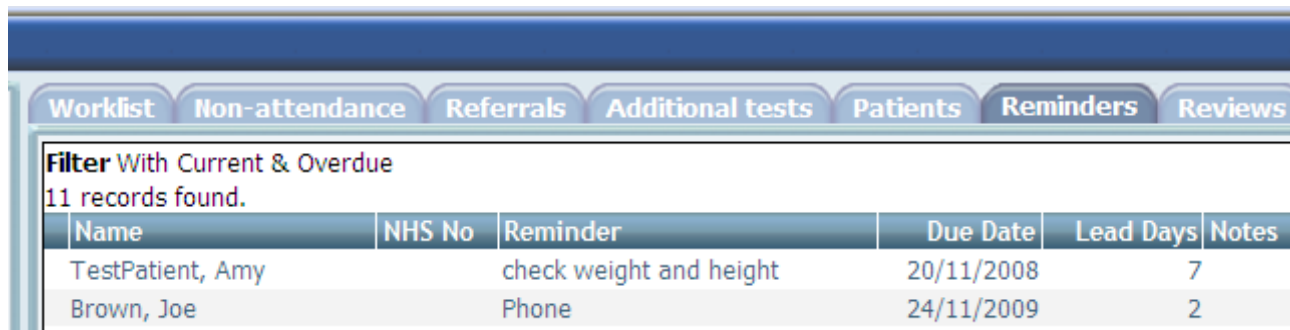
Click to choose from a list of drugs

Add drug						
Other drugs						
	Drug	Start date	End date	Dose	Frequency	Interaction
▼	AMIODARONE	30/07/2012		200 mg once	daily	Significant enhanced anticoagulation effect

Interactions will be highlighted if used locally.

10.4 Reminders

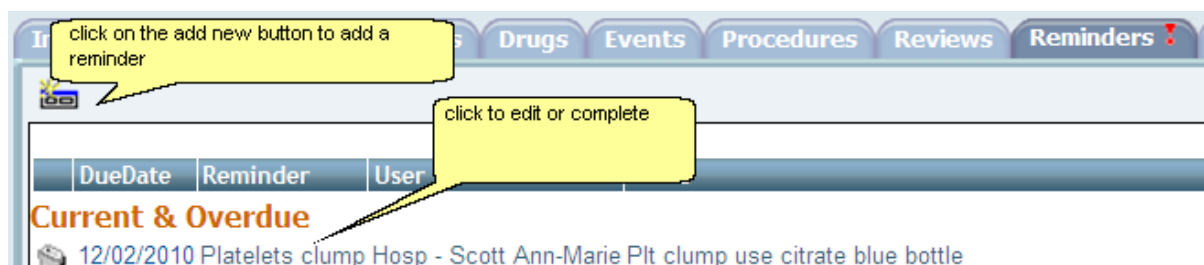
The Reminders list view is useful for finding current or overdue Reminders on various patients. The lead days are the number of days before the due date for which you wish to have the Reminder flagged on the Patient screen and the list view.



The screenshot shows the 'Reminders' tab selected in the top navigation bar. Below the tabs, there is a filter section that says 'Filter With Current & Overdue' and '11 records found.' Below this is a table with the following columns: Name, NHS No, Reminder, Due Date, Lead Days, and Notes.

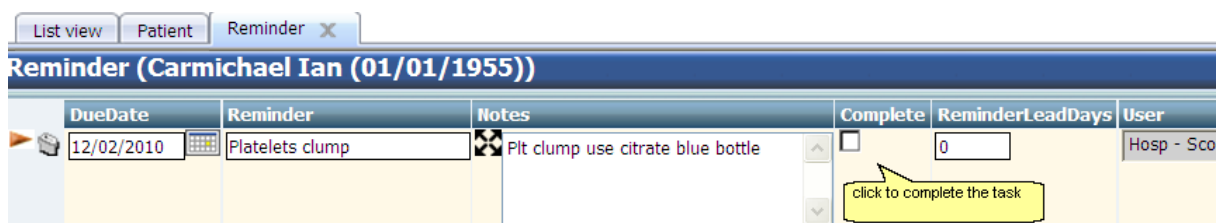
Name	NHS No	Reminder	Due Date	Lead Days	Notes
TestPatient, Amy		check weight and height	20/11/2008	7	
Brown, Joe		Phone	24/11/2009	2	

Add a Reminder from the main patient screen.



The screenshot shows the 'Reminders' tab in the top navigation bar. A yellow callout bubble points to the 'Add New' button with the text 'click on the add new button to add a reminder'. Another yellow callout bubble points to the 'Edit' button with the text 'click to edit or complete'. Below the buttons, there is a table with columns: DueDate, Reminder, and User. The table shows a single entry: '12/02/2010 Platelets clump Hosp - Scott Ann-Marie Plt clump use citrate blue bottle'.

Click on the Reminder and **mark it complete**.



The screenshot shows the 'Reminder (Carmichael Ian (01/01/1955))' view. It has tabs for 'List view', 'Patient', and 'Reminder'. Below the tabs is a table with columns: DueDate, Reminder, Notes, Complete, ReminderLeadDays, and User. The table shows a single entry: '12/02/2010 Platelets clump Plt clump use citrate blue bottle'. A yellow callout bubble points to the 'Complete' checkbox with the text 'click to complete the task'.

10.5 Activating and deactivating patient records

Your active patient license on DAWN is visible on your front screen.



Reports
Custom reports



Settings
Modify your personal

Current location for printing -

Database name	Date
RHdemo	
Patient Licenses : 500	
Active patient records	Pat
Rheumatology : 81	
Gastroenterology : 2	

See chapter on Dealing with Clinical Framework Monitoring for guidance on activating treatment plan for an active patient.

Inactivating patient records

1. Check that any open referrals and reminders are closed
2. Stop any treatment plan for the patient
3. On the **Personal** tab, mark the patient as inactive or deceased (this action is reversible in DAWN)

The screenshot shows the 'Personal' tab of a patient record in the DAWN system. The 'Contact info' section includes fields for Last Name (Brown), First Name (Joe), Age (56), Hosp No (5663128357), NHS No (1238123681263), Address1 (14 The Square), Address2, Town (Mintorpe), County (CUMBERLAND), PostCode (LA777), Sex (Male), Title, Date of Birth (12/12/2912), Ethnic Origin, and Causation. The 'Status' field at the bottom is set to 'Active'. A red arrow points to the 'Patient Deceased' button, which is highlighted in blue.

Reactivating patient records

On the **Personal** tab, mark the patient as active (this action is reversible)

Deleting patient records

There is no requirement to delete valid patient records where the patient has moved out of the area or died. Once any treatment plan is stopped, the record can be marked as Inactive or Deceased and will not affect your licensing on DAWN - it can remain on your database for audit purposes.

If you wish to remove a patient record that you have added in error, you must first:

- 1) Stop any treatment

- 2) Delete any/all treatment plan(s)
- 3) Mark the patient as inactive

A Delete button is then displayed so you can delete the patient record.


Part

XI

11 Viewing Patient History

Your patient may have several consecutive treatment plan records and only one of these may be active for their current anticoagulation.

Blue, Brian - 04/04/1946 - 342523555 - 4 T

Risk class	High	
Pref. clinic	NOAC Clinic (Big Hospital)	
Phone	015395 63091 - home	
Age	67	
Diagnosis	Recurrent DVT ...	
Target Range	Non-VKA	
Start date	03/01/2013 - Indefinite	
Anticoagulant	Rivaroxaban 20 mg Once Daily	
Treatment Plan	◀ 2 ▶ of 2 active	
Risks	poor compliance	

To see previous treatment plans, click on the 'Treatment Plans' tab bottom-right on your patient screen.

Persons	Treatment plans	Questionnaires	Test Results
---------	------------------------	----------------	--------------

AC: Anticoagulation

active	
Start date	03/01/2013
Duration	Indefinite
Target range	Non-VKA
Anticoagulant	Rivaroxaban 20 mg Once Daily
Referring GP	Central Surgery - Bloggs Frank
Consultant	Big Hospital - Stornaway Deirdre

stopped	
Start date	21/12/2012
Duration	Treatment stopped - Stopped at: 03/01/2013 11:42
Target range	Non-VKA
Anticoagulant	Rivaroxaban 15 mg Once Daily
Referring GP	-
Consultant	-
Cessation Reason	Patient choice

⚠ If your patient does not have a current active treatment plan record on DAWN, the patient may not appear on the list of scheduled

patients.

Part

XII

12 Using List Views

DAWN provides *List Views* to assist you with your workflows. *List Views* are lists of patients meeting certain criteria, such as patients waiting on a follow-up.

- You can alter which patients are displayed by selecting different tabs and different filters. In this way you can quickly find lists of patients needing, say, appointment reminders or abnormal liver function reviews.
- Clicking on a patient in a *List View* opens the patient's record so you can perform any appropriate actions, such as completing a questionnaire or scheduling the next review.
- Closing the patient's record returns you to the list. If the action you have taken means the patient no longer meets the criteria (for example they no longer have an unchecked result), they disappear from the list. This means you are only left with the patients you still need to deal with.



HINT

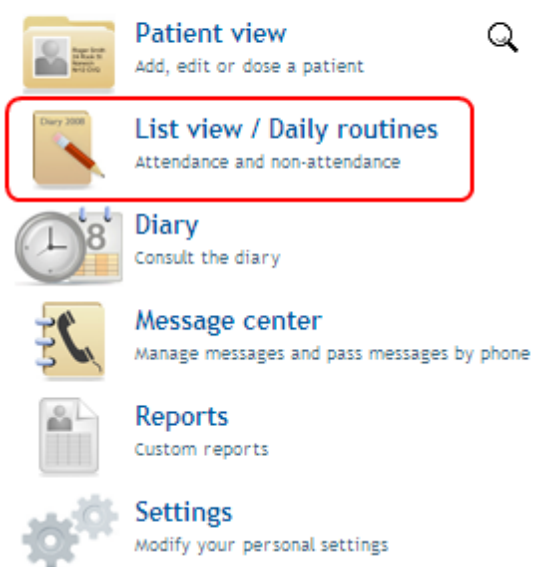
1. Remember there are a number of different lists for different purposes on blue tabs at the top of the screen
2. If you select filters on the left to refine the list, remember to remove the filters to check the full list.

[Navigating List Views](#)

[\(back to Workflows in DAWN page\)](#)

12.1 Navigating List Views

Click the *List view / Daily routines* button on the front screen to open the *List View* screen.



The *List View* screen consists of a number of tabs. Each tab contains a different *List View* specifically designed to support key activities such as reviewing test results or following up non-attenders.

Each individual *List View* comprises two panes:

- The control pane
- The list pane

The list pane is the right-hand pane and lists all the patients or tests meeting the selected criteria.

The control pane is the left-hand pane and contains drop down lists of additional filters that allow you to further control which patients or tests are displayed.

Each tab contains a list designed to support certain key activities

List of questionnaires. May be filtered on date scheduled / completed

With (Unfiltered)
All (All patients)
(All risk classes)
(All diagnoses)
All (All clinics)
Next 7 days

Work List Non Attendance Non-VKA Clinic S

Date Next 7 days
2 records found.

Scheduled

Name	Unit No	Date	Questionn
Wise, Ernest	784567894	04/09/2012	
Stephenson, Hedley	123456	05/09/2012	

The left-hand control pane contains additional filter options that allow you to break down the list further.

The right-hand pane lists the records that meet the selected filter criteria.



Important notes on using filters – more than one filter may be chosen in the control panel on the left at any time. The following example selects patients in the “Postal clinic” who have “Scheduled or Overdue” appointments for review.

With Scheduled & Overdue
All (All patients)
(All risk classes)
(All diagnoses)
All Postal Clinic (St Elsewhere)
Next 7 days

Each filter can then be removed by choosing the default option (like All clinics) again.



Please note:

- The **With** or **Without** option applies only to the uppermost filter, i.e. “Scheduled & Overdue” in the example above. In this case, changing the setting to **Without** would select all patients in the Postal clinic who do not have scheduled or overdue review appointments on DAWN. It would not select patients who are not in the “Postal clinic”.
- If you use filters to work with subsets of your patients, you must always check the unfiltered list to find patients who do not fit any of the criteria you select.

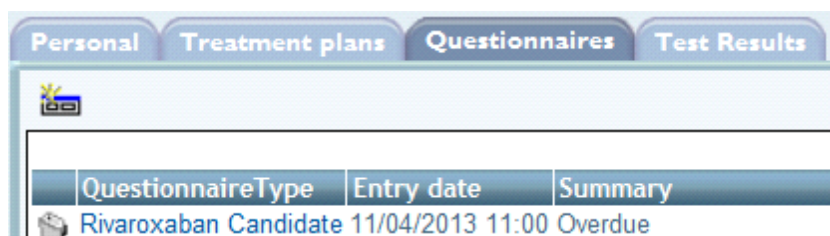
For example, you may wish to divide up checking flagged results by assigning one clinic to one member of staff and another clinic to a different member of staff. Each person uses the clinic filter to show patients in their clinic and works down their list checking the results. However, a patient who has not yet been assigned to a particular clinic does not appear on either list. As such, someone should always check the list for *all clinics* (which includes everyone) to ensure there is no one left with flagged results that still need checking.

Part

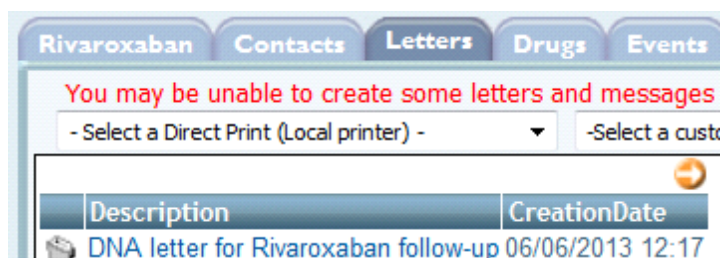


13 Handling Non-Attendance for Novel Oral Anticoagulant Patients

If a patient fails to attend for a review of their Rivaroxaban therapy, update the scheduled Follow-up questionnaire with a new date for their appointment.



Print any letters / faxes / e-mails as required from the Letters tab.



If a patient persistently fails to attend or have their blood tested you may wish to contact their GP or even discharge them from your monitoring service. You may wish to stop the treatment plan and mark the patient as 'Inactive' on the Personal tab.

13.1 Non-attendance process

explains how to:

- Find patients overdue for review
- Record any necessary action
- Generate a letter (or e-mail) to the non-attending patient

See the following sections for more information:

[Using the list view to find patients who are overdue for follow-up](#)

[Changing the treatment plan](#)

[Printing letters from DAWN using pre-configured templates.](#)

Part



14 Running Reports



Choose the report from the dropdown menu and select any parameters as required before choosing [Show report](#).

Report: Patients by Current Drug - Count

Drug name: 8-DEOXYCYCLINE, ACETAZOLANIDE, ACTOFAN, ACTRON EFF. TABLETS, ADALAT, ADIFAX, ALKA SELTZER, ALLOPURINOL

Department: Rheumatology

Show report
Download as XML
Download as Text
Email address: Send

Rheumatology

Therapy	Reference Range	Phase	Number of patients	Drug
DMARD	Methotrexate - Hydroxychloroquine 2- weekly monitoring		1	Hydroxychloroq
DMARD	Methotrexate - Hydroxychloroquine 2- weekly monitoring		1	Methotrexate

Data may be extracted from DAWN by saving as a text file or e-mailing to yourself or a colleague. Further data analysis may then be possible using Microsoft Excel or another programme.

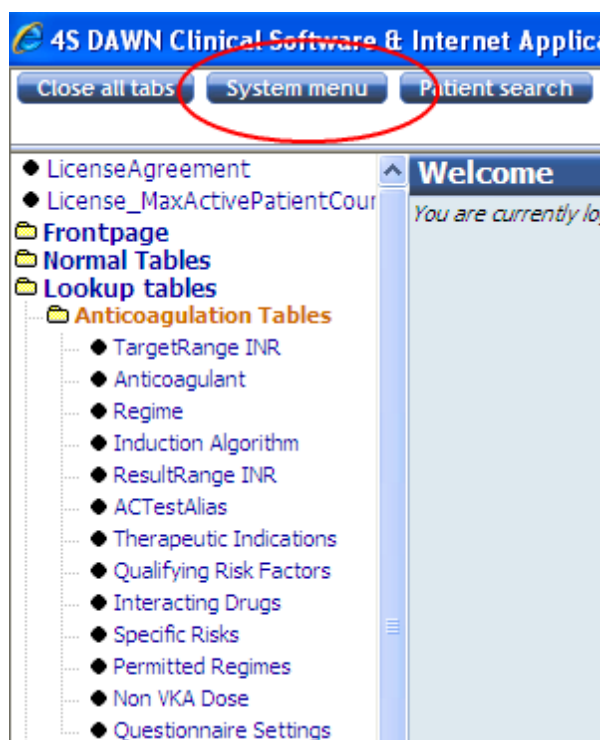
[\(back to Workflows in DAWN page\)](#)


Part



15 Settings for Novel Oral Anticoagulants

Your System Manager can access settings for Rivaroxaban and other anticoagulants in the **System menu > Lookup tables**.



 The settings here are critical to how your DAWN system operates and any changes / deletions / additions are likely to affect the anticoagulant dosing of past / present or future patients. **ALL changes to settings should be tested thoroughly on a test database before applying changes in your production database. ALL outputs (like letters / e-mails) from the DAWN system should be checked carefully for completeness and accuracy by a suitably qualified healthcare professional before the patient is instructed.**

For a new oral anticoagulant, 4S Information Systems Ltd will supply settings for Anticoagulant, Regime, Non VKA Dose and Questionnaire Settings. It is unlikely that you will need to modify these settings but please contact the support team (support@4s-DAWN.com) with any questions or issues. From time to time, you may need to review or consider updates to the following tables for a particular anticoagulant -

- | | |
|---|--|
| • Therapeutic Indications | if Rivaroxaban may be used in a new condition now |
| • Interacting Drugs | if new information emerges on concomitant drugs affecting the chosen anticoagulant |
| • Specific Risks | if new conditions are found to affect Rivaroxaban therapy |
| • Regime and Non VKA | to set a completely new dosage and dose settings |

[Dose](#)

- [General Lookup Category](#)

to adjust the dropdown menus for [CHADS or HASBLED](#)

[Settings](#)

[scores](#)

For help and advice on editing any settings in your DAWN system, please contact support@4s-DAWN.com.

15.1 Therapeutic indications

Please Note: The appropriate anticoagulant, diagnosis and regime need to be added to the DAWN system (if they are not already there) before proceeding to the step below.

The primary diagnosis for your patient has to be set as a valid qualifying diagnosis or 'therapeutic indication' for the particular anticoagulant. For example, the settings for Rivaroxaban may be as shown

Therapeutic Indications		
Anticoagulant	Diagnosis	Default Regime
Rivaroxaban	AFNV - Atrial fibrillation nonvalvular	Rivaroxaban 20 mg Once Daily
Rivaroxaban	RecDVT - Recurrent DVT	(None selected)
Rivaroxaban	- DVT - Provoked	(None selected)
Rivaroxaban	- DVT - Unprovoked	(None selected)
Rivaroxaban	- PE - Provoked	(None selected)
Rivaroxaban	- PE - Unprovoked	(None selected)
Rivaroxaban	RecPE - Recurrent PE	(None selected)

Add to these settings as required as new medical evidence emerges so that an anticoagulant is known to be approved for use with a particular primary diagnosis.

NB - deleting entries on this table may result in multiple patients not getting a dose or next appointment.

[\(back to Settings for New Oral Anticoagulants page\)](#)

15.2 Interacting drugs for non-VKA

It is possible to link an anticoagulant with a drug which has one of the following interactions if prescribed concomitantly.

- Contraindication
- Haemorrhagic Risk
- Thromboembolic Risk

These settings have a notes field and the notes plus appropriate warnings will display on appropriate patient questionnaires and may prevent activation of a treatment plan. See examples for [contraindicated drugs](#) and [interacting drugs](#).

Interacting Drugs	
Anticoagulant	Rivaroxaban
Drug	KETOCONAZOLE
Interaction	Contraindication
Clinical Advice	Not recommended in patients receiving conco



NB - addition / editing / deletion of entries on this table may cause checks on important drug interactions to be missed.

NB - deletion of an entry for Interacting Drugs may cause loss of information in any patient questionnaire not completed or unlocked for editing.

[\(back to Settings for New Oral Anticoagulants page\)](#)

(Technical note - the table name for Interacting drugs is AnticoagulantInteractionDrug)

15.3 Specific Risks for non-VKA

Haemorrhagic risks, thromboembolic risks and contraindicated conditions may be stored in this table for use in patient questionnaires.

These settings populate the questionnaire screens for [haemorrhagic risks](#) and [other contraindications](#).

Specific Risks	
Anticoagulant	Rivaroxaban
Risk	Uncontrolled severe arterial hype
Risk Type	Haemorrhagic risk
Clinical Advice	Rivaroxaban, like other antithrombotic agents,

NB - deletion of an entry for Specific Risks may cause loss of information in any patient questionnaire not completed or unlocked for editing.

[\(back to Settings for New Oral Anticoagulants page\)](#)

(Technical note - the table name for Specific Risks is AnticoagulantRisk.)

15.4 Regime and Non VKA Dose

Regime settings are required for each Rivaroxaban (or other non-VKA) dose to be used in DAWN. Each dosage needs to exist as a 'Regime', a 'non-VKA Dose' and as a 'Permitted Regime'.

If a new dosage or dosage frequency is approved you may add this to each of the 3 following tables as appropriate so that the settings are available in a DAWN patient record.

Regime

Regime		
Pharmaceutical Mixed Tablets (in mg / Daily Avg)	Daily	New
Rivaroxaban 15 mg Once Daily	Daily	Active
Rivaroxaban 15 mg Twice Daily	Daily	Active
Rivaroxaban 20 mg Once Daily	Daily	Active
Warfarin 1 and 5mg (in Tablets/Daily) with Halves	Daily	Active
Warfarin 1mg Strength (in Mg / Daily Avg)	Daily	New
Warfarin 1mg Whole Tablets (in Mg / Daily Avg)	Daily	New
Warfarin 1mg Whole Tablets (in Tablets/DailyAvg)	Daily	New
Warfarin 3 and 5 mg (in Tablets/Daily) in Halves	Daily	New

Description	Rivaroxaban 15 mg Once Daily	CodeName	Riv150D
Status	Active		
Anticoagulant	Rivaroxaban	Brand	(None selected)
Daily/Weekly	Daily		
DoseUnits	Mg	MinimumTabletPart	Half a tablet
Tablet 1			(None selected)
Instruction	There are no items to display		

The settings are similar to VKA doses in this table except that no Instructions are required.

NB - deletion of an entry for Regime may result in multiple patients not getting a dose or next appointment.

Non VKA Dose

The settings for non-VKA regimes link to a numeric Total Daily Dose which is stored in this table for reference. Elements of the settings for a chosen regime are compared between the regime chosen in a treatment plan and in the [Questionnaires](#) and this is the basis of some of the [validation checks](#) on each patient.

Non VKA Dose				
Regime	Dose	Dose Units	Frequency	Total Daily Dose
Rivaroxaban 15 mg Once Daily	15	mg	Once Daily	15
Rivaroxaban 15 mg Twice Daily	15	mg	Twice Daily	30
Rivaroxaban 20 mg Once Daily	20	mg	Once Daily	20

Each regime for which a dose check is required needs to have a setting in this table. If a Rivaroxaban **Initiation Questionnaire** requires this dose check, it will not be possible to activate a treatment plan for the new dosage without a setting in this table.






The settings here are critical to how your DAWN system operates and any changes / deletions / additions are likely to affect the anticoagulant dosing of past / present or future patients. ALL changes to settings should be tested thoroughly on a test database

before applying changes in your production database.

Permitted Regimes

Other validation checks are made on first activation of a treatment plan and on saving an Initiation Questionnaire on the settings stating which regimes (*ie* dose of Rivaroxaban for example) are appropriate for which primary diagnosis (or therapeutic indication). Additional regimes can be added to this table as appropriate.

Permitted Regimes			
	Therapeutic Indication	Regime	Clinical Advice
	Rivaroxaban - RecPE - Recurrent PE	Rivaroxaban 15 mg Twice Daily	Normal Dose Day 1-21
	Rivaroxaban - RecPE - Recurrent PE	Rivaroxaban 15 mg Once Daily	A reduction of the dose from 20mg
	Rivaroxaban - RecPE - Recurrent PE	Rivaroxaban 20 mg Once Daily	Normal Dose Day 22 onwards

The 'Clinical Advice' is displayed on the [Initiation Questionnaire](#) screen as below and the Order number is relevant for display on the questionnaire screen.

Dosing regime	Advice
Rivaroxaban 15 mg Twice Daily	Normal Dose Day 1-21
Rivaroxaban 15 mg Once Daily	A reduction of the dose from 20mg once daily to 15 mg once daily should be considered if the patient's assessed risk for bleeding outweighs the risk for recurrent DVT and PE.
Rivaroxaban 20 mg Once Daily	Normal Dose Day 22 onwards

NB - deletion of an entry for Permitted Regimes may result in multiple patients not getting a dose or next appointment.

[\(back to 'Settings for New Oral Anticoagulants' page\)](#)

(Technical note - the table name for Permitted Regimes is AnticoagulantIndicationRegime.)

15.5 General Lookup Category settings for non-VKA

The general lookup category settings are used in some questionnaires. Options available for answering questions on the questionnaire may be edited / added to or deleted from this table.

Name	Description	CodeName	InUse	GeneralLookup
HASBLED	HAS-BLED	HASBLED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Caption	Value
0: Risk was 0.9% in one study	0
1: Risk was 3.4% in one study	1
2: Risk was 4.1% in one study	2
3: Risk was 5.8% in one study	3
4: Risk was 8.9% in one study	4
5: Risk was 9.1% in one study	5
6: Risk not known - too little data	6
7: Risk not known - too little data	7

See [CHADS score](#)

NB - renaming or deletion of an entry for General Lookup or General Lookup Category may cause loss of information in any patient questionnaire not completed or unlocked for editing.

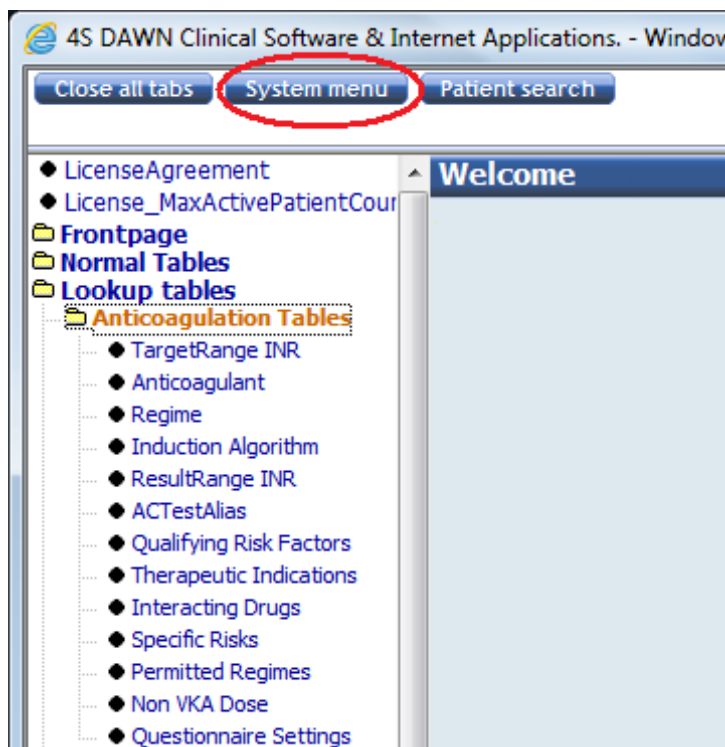
[\(back to Settings for New Oral Anticoagulants page\)](#)

Part



16 Settings for Novel Oral Anticoagulants (4S copy)

Your System Manager can access settings for Dabigatran and other anticoagulants in the **System menu > Lookup tables**.



The settings here are critical to how your DAWN AC system operates and any changes / deletions / additions are likely to affect the anticoagulant dosing of past / present or future patients. ALL changes to settings should be tested thoroughly on a test database before applying changes in your production database. ALL outputs (like letters / e-mails) from the DAWN AC system should be checked carefully for completeness and accuracy by a suitably qualified healthcare professional before the patient is instructed.

For a new oral anticoagulant drug, settings are added to the following tables -

- Anticoagulant *
- Regime *
- Qualifying Risk Factors
- [Therapeutic Indications](#) *
- [Interacting Drugs](#)
- [Specific Risks](#)
- Permitted Regimes *
- [Non VKA Dose](#)
- Questionnaire Settings
- [General Lookup Category Settings](#)

* mandatory settings

16.1 Anticoagulant for non-VKA (COPY)

An Anticoagulant will be set for each non-VKA but tablet / pill size settings are not required.



16.2 Regime for non-VKA (COPY)

Regime settings are required for each Dabigatran (or other non-VKA) dose to be used in DAWN AC.

The screenshot shows the 'Regime' configuration window. It has a table with columns 'Description', 'DailyWeekly', and 'Status'. The table lists several regimens, including 'Acenocoumarol Whole Tablets (in Mg /Daily Avg)' and various 'Dabigatran' dosages. Below the table, there are detailed settings for the selected regimen, 'Dabigatran 110 mg twice daily'. These settings include 'CodeName' (DAB110TD), 'Status' (Active), 'Anticoagulant' (Dabigatran), 'Brand' (None selected), 'DailyWeekly' (Daily), 'DoseUnits' (Mg), 'MinimumTabletPart' (Half a tablet), and 'Tablet 1' (None selected). The 'Instruction' field is empty, showing the message 'There are no items to display'.

The settings are similar to VKA doses in this table except that no Instructions are required.

NB - deletion of an entry for Regime may result in multiple patients not getting a dose or next appointment.

16.3 Qualifying Risk Factors for non-VKA (COPY)

For some anticoagulants, it may be important to note which reason(s) or thrombotic risks have caused the patient to be prescribed this anticoagulant.

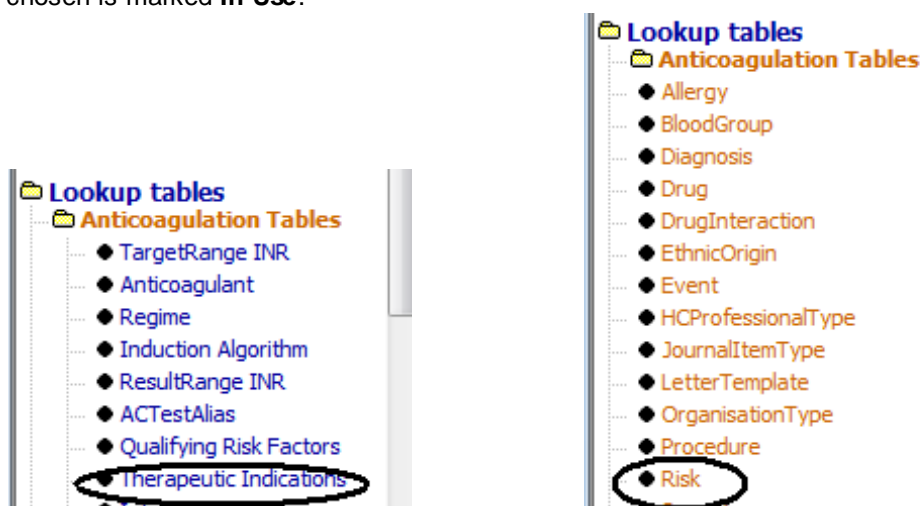
If no Qualifying Risk Factors are added, no opportunity to record these risk factors will be provided on an Initiation Questionnaire.

For example, for Dabigatran in AF patients the following risk factors may contribute to the decision to

prescribe Dabigatran.

Qualifying Risk Factors	
Therapeutic Indication	Risk
Dabigatran - AFNR - Atrial fibrillation nonvalvular	Aged ≥ 65 with diabetes mellitus, coronary artery d
Dabigatran - AFNR - Atrial fibrillation nonvalvular	Aged 75 or over
Dabigatran - AFNR - Atrial fibrillation nonvalvular	Left ventricular ejection fraction $< 40\%$
Dabigatran - AFNR - Atrial fibrillation nonvalvular	Previous Stroke, transient ischemic attack or systemic
Dabigatran - AFNR - Atrial fibrillation nonvalvular	Symptomatic heart failure \geq NYHA Class 2

The entries on this table link a **Therapeutic indication** and a **Risk** and you should ensure that the Risk chosen is marked **In Use**.



NB - deletion of an entry for Qualifying Risk Factors may cause loss of information in any patient questionnaire not completed or unlocked for editing.

16.4 Therapeutic indications (COPY)

The primary diagnosis for your patient has to be set as a valid qualifying diagnosis or 'therapeutic indication' for the particular anticoagulant. For example, the settings for Dabigatran may be as shown

Therapeutic Indications			
Anticoagulant		Diagnosis	Default Regime
Dabigatran	▼ ➡	AFNR - Atrial fibrillation nonvalvular	▼ ➡ Dabigatran 150 mg twice daily
Dabigatran	▼ ➡	ORTHO_HIP - Total hip replacement surgery	▼ ➡ Dabigatran 220mg once daily
Dabigatran	▼ ➡	ORTHO_KNEE - Total knee replacement surgery	▼ ➡ Dabigatran 220mg once daily

Add to these settings as required as new medical evidence emerges.

NB - deleting entries on this table may result in multiple patients not getting a dose or next appointment.

16.5 Interacting drugs for non-VKA (COPY)

It is possible to link an anticoagulant with a drug which has one of the following interactions if prescribed concomitantly.

- Contraindication
- Haemorrhagic Risk
- Thromboembolic Risk

These settings have a notes field and the notes plus appropriate warnings will display on appropriate patient questionnaires and may prevent activation of a treatment plan.

See examples for [contraindicated drugs](#) and [interacting drugs](#).

Interacting Drugs	
Anticoagulant	Dabigatran
Drug	IBUPROFEN
Interaction	Haemorrhagic risk
Clinical Advice	Close clinical surveillance (looking for signs of



NB - addition / editing / deletion of entries on this table may cause checks on important drug interactions to be missed.

NB - deletion of an entry for Interacting Drugs may cause loss of information in any patient questionnaire not completed or unlocked for editing.

(Technical note - the table name for Interacting drugs is AnticoagulantInteractionDrug)

16.6 Specific Risks for non-VKA (COPY)

Haemorrhagic risks, thromboembolic risks and contraindicated conditions may be stored in this table for use in patient questionnaires.

These settings populate the questionnaire screens for [haemorrhagic risks](#) and [other contraindications](#).




Specific Risks	
Anticoagulant	Dabigatran
Risk	Organic lesion at risk of bleeding
Risk Type	Contraindication
Clinical Advice	Contraindicated

NB - deletion of an entry for Specific Risks may cause loss of information in any patient questionnaire not completed or unlocked for editing.

(Technical note - the table name for Specific Risks is AnticoagulantRisk.)

16.7 Permitted Regimes (COPY)

Checks are made on first activation of a treatment plan and on saving an Initiation Questionnaire on the settings stating which regimes (ie dose of Dabigatran for example) are appropriate for which primary diagnosis (or therapeutic indication). Additional regimes can be added to this table as appropriate.

Permitted Regimes			
	Therapeutic Indication	Regime	Clinical Advice
	Dabigatran - AFNR - Atrial fibrillation nonvalvular	Dabigatran 150 mg twice daily	Normal dose
	Dabigatran - AFNR - Atrial fibrillation nonvalvular	Dabigatran 110 mg twice daily	Patients aged 80 or over, or at risk of bleeding
	Dabigatran - AFNR - Atrial fibrillation nonvalvular	Dabigatran 220mg once daily	

The 'Clinical Advice' is displayed on the [Initiation Questionnaire](#) screen as below and the Order number is relevant for display on the questionnaire screen.



Valid dosing regimes for this indication are:	
Dosing regime	Advice
Dabigatran 150 mg twice daily	Normal dose
Dabigatran 110 mg twice daily	Patients aged 80 or over, or at risk of bleeding
Dabigatran 220mg once daily	

NB - deletion of an entry for Permitted Regimes may result in multiple patients not getting a dose or next appointment.

(Technical note - the table name for Permitted Regimes is AnticoagulantIndicationRegime.)

16.8 Non VKA Dose (COPY)

The settings for non-VKA regimes link to a numeric Total Daily Dose which is stored in this table for reference. Elements of the settings for a chosen regime are compared between the regime chosen in a treatment plan and that chosen in an Initiation Questionnaire.

Non VKA Dose					
	Regime	Dose	Dose Units	Frequency	Total Daily Dose
	Dabigatran 110 mg twice daily	110	mg	Twice Daily	220
	Dabigatran 150mg once daily	150	mg	Once Daily	150

Each regime for which a dose check is required needs to have a setting in this table. The requirement

for a dose check is set in the 'Questionnaire settings' table.



The settings here are critical to how your DAWN AC system operates and any changes / deletions / additions are likely to affect the anticoagulant dosing of past / present or future patients. ALL changes to settings should be tested thoroughly on a test database before applying changes in your production database.

16.9 Questionnaire settings for non-VKA (COPY)

Settings in the 'Questionnaire settings' table define which questionnaires are used with particular non-VKA drugs and how they are used.

- A questionnaire may be required to be completed before activating a treatment plan.
- The dose selected on the questionnaire may need to be checked against the treatment plan settings on first activation of a treatment plan.
- DAWN AC may prevent a questionnaire from being completed for a patient without an appropriate active treatment plan.



The settings here are critical to how your DAWN AC system operates and any changes / deletions / additions may affect the anticoagulant dosing of patients. ALL changes to settings should be tested thoroughly on a test database before applying changes in your production database. ALL outputs (like letters / e-mails) from the DAWN AC system should be checked carefully for completeness and accuracy by a suitably qualified healthcare professional before the patient is instructed.

16.10 General Lookup Category settings for non-VKA (COPY)

The general lookup category settings are used in some questionnaires. Options available for answering questions on the questionnaire may be edited / added to or deleted from this table.

GeneralLookupCategory

Name: CHA2DS2-VASc Score

Description: CHA2DS2-VASc Score

CodeName: CHA2DS2VA

InUse: ☒

GeneralLookup:

Caption	Value
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7

See [CHADS score](#)

NB - renaming or deletion of an entry for General Lookup or General Lookup Category may cause loss of information in any patient questionnaire not completed or unlocked for editing.

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